



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

Table with 2 columns: Field Name, Value. Fields include Applicant Name, Mailing Address, City, State, Zip, Daytime Telephone No., Email Address, Property Serial Number, Abatement Program.

Choose your circumstance(s):

Medical Emergency section with checkbox and descriptive text: Describe the nature of the medical emergency and the relationship of the individual with the emergency to the property owner(s):

Identify the length of the medical emergency: DD / MM / YY to DD / MM / YY

Did this medical emergency require hospitalization? Yes [] No []

Identify the length of hospitalization: DD / MM / YY to DD / MM / YY

Death of owner or immediate family member section with checkbox and text: Name of decedent and relationship to owners(s) (if applicable):, Identify the date of death: DD / MM / YY

Extraordinary and unanticipated circumstances section with checkbox and text: Describe the nature of the extraordinary and unanticipated circumstance:

Identify the length of the extraordinary and unanticipated circumstance: DD / MM / YY

I certify, as per UT Code 78B-18a, that all statements herein and/or attachments are true, correct and complete.

Signature

Date



2024 Veteran with a Disability or Surviving Spouse Property Tax Exemption Application

UCA §59-2-1903 and 1904

Curtis Koch, MBA, CGFM
Davis County Auditor
P.O. Box 618
Farmington Utah 84025
Telephone: (801) 451-3331

The deadline for filing this application with Davis County is September 1

Veteran's Last Name	Veteran's First Name	Middle Initial	Birth Date	Social Security Number
Spouse's Last Name	Spouse's First Name	Middle Initial	Birth Date	Social Security Number
Address	City	State	ZIP Code	Phone Number
Email	Emergency Contact's Name	Relation	Phone Number / Secondary Number	
Property Serial Number	Tax District	Acres	Date of Purchase	Qualified Year
Dates of Military Service			Overall Service Connected Combined Rating	
From	To			%

- Yes No Is the residential property identified above my "primary residence," the place where I reside, as defined by applicable Utah law?
- Yes No Is the residential property identified above assessed in the name of anyone other than the undersigned applicant because of trust?
If yes, please enclose a copy of the applicable documentation with this application.
- Yes No As required, the undersigned applicant has enclosed herewith a copy of the veteran's benefit letter showing percentage of disability and the effective date and year?
- Yes No Have you applied for the veteran armed forces tax exemption for the 2022 tax year in another county?
If yes, please identify which county? _____

Failure to timely provide the documentation required above will result in a denial of this application.

Due to legislative changes effective January 1, 2020, the veteran armed forces tax exemption for tax year 2024 will be applied to the property that the undersigned applicant **owns and resides on September 1, 2024**. Therefore, property may be purchased by the undersigned applicant in 2022; however, only the property owned by the undersigned applicant on September 1, 2024 will receive the veteran armed forces tax exemption for tax year 2024.

For questions regarding the use of the veteran armed forces tax exemption for tangible personal property that is held exclusively for personal use and is not used in a trade or business, please contact the Davis County Tax Administration office at (801) 451-3331.

Under penalties of perjury, the undersigned applicant declares to the best of his/her knowledge and understanding that the information in, and enclosed with, this application is true, correct and complete.

Applicant is (Please mark the applicable box below):

- A veteran with a disability
- Unmarried surviving spouse of a deceased veteran with a disability
(If filing for the first time please submit a copy of a Death Certificate)

A minor orphan of a deceased veteran with a disability (If filing for the first time please submit a copy of a Death Certificate)

Applicant's Signature	Date
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(For Davis County Use Only)

Received By	Date Received
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