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 WEBER COUNTY CLERK/AUDITOR  
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**2020 TAX RELIEF APPLICATION**  
[webercountyutah.gov/Clerk\\_Auditor/tax\\_relief.php](http://webercountyutah.gov/Clerk_Auditor/tax_relief.php)



*Please file early. We may need additional documents from you.*  
**ALL SUPPORTING DOCUMENTS MUST BE RECEIVED BY DEC 31<sup>ST</sup>, 2020.**

For Office Use Only  
 Abate No: \_\_\_\_\_  
 Initials: \_\_\_\_\_  
 Report No: \_\_\_\_\_  
 Ownership: \_\_\_\_\_

1. Please check the type(s) of relief you are applying for:  
 Circuit Breaker    Abatement    Deployed Military    Veteran    Blind    Mobile Home    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 \_\_\_\_\_  
 Parcel Number      Mobile Home (List Year, Make and Serial Number)

6.  Yes  No Did you own this property as of January 1, 2020? *(Sept 1<sup>st</sup> for Veteran w/ Disabilities program.)*  
 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?  
 9.  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?  No  Yes *(Please include copy of changes.)*  
 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? \_\_\_\_\_ %

**SELLING YOUR HOME THIS YEAR? CONTACT US FIRST FOR MORE INFO!**

**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. **NOTE:** If you checked box 15, and have not already filed a Supplemental Affidavit for unmarried widow(er) or minor orphan with a previous application, please contact our office to request the Affidavit or visit [http://www.webercountyutah.gov/Clerk\\_Auditor/add\\_tax\\_relief.php](http://www.webercountyutah.gov/Clerk_Auditor/add_tax_relief.php)

*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. **NOTE:** If you checked box 17, please file the Supplemental Affidavit for unmarried widow(er) or minor orphan. This form is available from our office, or at [http://www.webercountyutah.gov/Clerk\\_Auditor/add\\_tax\\_relief.php](http://www.webercountyutah.gov/Clerk_Auditor/add_tax_relief.php)

**DEPLOYED MILITARY EXEMPTION**      18. Qualifying Duty Dates

*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 outside of Utah for at least 200 days of a 365 day period and  
 20.  my 200<sup>th</sup> qualifying day was in 2019.      From \_\_\_\_\_ To \_\_\_\_\_  
     *(If your 200<sup>th</sup> day was in 2020, apply in 2021.)*

**CIRCUIT BREAKER AND ABATEMENT EXEMPTION - Must include 2019 income documents. See below.**

22.  Yes  No Will you be age 66 or older before December 31, 2020?  
 If under age 66: 23.  Yes  No Are you an unmarried widow or widower? (First time applicants please submit copy of death certificate.)  
 If yes, month and year of spouse's death: \_\_\_\_\_  
 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 in Utah for the entire year of 2020?  
 27.  Yes  No Will you reside at this address for 10 months out of the year?  
 If you answered "No" please explain: \_\_\_\_\_  
 28.  Yes  No Did anyone claim you on their 2019 tax return? (Do you rely on someone else for financial support?)  
 29.  Yes  No Do you own any other Real Estate? If yes, please list: \_\_\_\_\_

30. Please list all household members living in the home during 2020. Include their amounts in lines 31-38 below.

Name	Age	Relationship	Name	Age	Relationship
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

31. Please list any liquid asset balances. NOTE: Does not include retirement accounts (i.e.: IRA & 401k).

Savings	Checking	CDs	Money Market	Other
_____	_____	_____	_____	_____

**2019 GROSS INCOME – INCLUDE INCOME FOR YOU & ALL PEOPLE LISTED IN ITEM #30.**

**You Must Attach 2019 Income Documents To Verify These Amounts.**

32. Social Security, railroad retirement benefits and/or other government programs.	\$ _____
33. Gross wages, salaries, tips, and/or other compensation.	\$ _____
34. Pensions, annuities, V.A. disability benefits and/or trust income.	\$ _____
35. Welfare, unemployment, alimony and/or strike benefits.	\$ _____
36. Interest and/or dividends (taxable and non-taxable).	\$ _____
37. Other income (Specify: rent, capital gains, etc.)	\$ _____
38. TOTAL 2019 GROSS HOUSEHOLD INCOME (Add lines 32 through 37).	\$ _____

**ALL DOCUMENTS MUST BE RECEIVED BY: December 31<sup>st</sup> 2020**

**For tax relief amounts to show on the 2020 Tax Notice, this application must be filed by September 1, 2020**

**OATH AND SIGNATURE**

Under penalties of perjury, I declare that I am a lawful resident of Weber 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 Weber 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.

39. Applicant's Signature: \_\_\_\_\_ 41. Spouse's Signature: \_\_\_\_\_

(If home is owned in joint tenancy.)

40. Date: \_\_\_\_\_ A Signed Application Needs To Be Filed Each Year by Dec. 31 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: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Address: \_\_\_\_\_

Signature of Person Preparing This Form: \_\_\_\_\_