Ricky Hatch, CPA Weber County Clerk/Auditor 2380 Washington Blvd., Suite 320 Ogden, UT 84401-1456	2024 GENERAL TAX RELIEF webercountyutah.gov/Clerk_Auditor/tax_relief.php							
PHONE/FAX: (801) 399-8489 EMAIL: TAXRELIEF @WEBERCOUNTYUTAH.GOV	Please file early. We may need         additional documents from you.         ALL APPLICATIONS MUST BE         SUBMITTED BY SEPTEMBER 1 <sup>ST</sup> , 2024.    Notes:							
For Office Use Only		SEFTEMBER 1, 2	Notes:					
Initials:	ate Stamp							
Report No:								
Ownership:								
APPLICANT		CO-OWNER						
1		6						
Last Name First	Middle	Last Name	First Middle					
2 3		7	8					
Date of Birth Socia	ll Security Number	Date of Birth	Social Security Number					
4		9.						
Email		Email						
5Applicant Phone Number	11 Parcel Number/M	lobile Home Number	10 Co-Owner Phone Number					
12								
Address       City & State       Zip Code         13. [] Yes [] No       Is this property your primary residence? (County may require residency verification.)         14. [] Yes [] No       Did you own this property as of January 1, 2024?         15. [] 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? []Yes []No (Please include copy of changes.)         16. [] Yes [] No       Have you filed for any Tax Relief this year in another county or state?								
If yes, prior address:								
<b><u>CIRCUIT BREAKER &amp; ABATEMENT</u></b> Additional forms at https://www.webercountyutah.gov/Clerk_Auditor/add_tax_relief.php								
18. []Yes[]NoAre you an If yes, m19. []Yes[]NoAre you dis20. []Yes[]NoAre paying21. []Yes[]NoWill you li22. []Yes[]NoWill you re If you an	taxes an extreme hards we in Utah for the entire side at this address for swered "No" please ex	vidower? e's death: <i>nal form: Medical Stateme</i> ship? ( <i>Submit additional j</i> e year of 2024? 10 months out of the ye plain:	ent signed by your doctor.) form: Hardship letter.)					
	24. []Yes []No Do you own any other Real Estate? If yes, please list addresses:							
Please complete the Financial In	nformation section on	the back of this form an	ed submit supporting documents.					

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

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

25. [] I am legally blind in both eyes, OR 26. [] I am an unmarried spouse or minor orphan of a deceased blind person. NOTE: If you checked box 26, please file the Supplemental Affidavit for unmarried widow(er) or minor orphan. This form is available from our office, or at https://www.webercountyutah.gov/Clerk\_Auditor/add\_tax\_relief.php

You do not need to complete the financial information below for the Blind Exemption. For blind exemption on personal property (cars, trailers, etc.) please contact our office.

## SENIOR TAX DEFERRAL

- []No Will you be age 75 or older by December 31, 2024? (Submit proof of age.) 27. []Yes
- []No Have you owned your primary residence for a continuous 20-year period as of Jan 1 this year? 28. []Yes

29. []Yes []No Is there a mortgage (including reverse mortgage) or other trust deed on the property?

30. [] I understand that the Senior Tax Deferral program does not reduce my property taxes. My property taxes will accrue, with interest, and the accrued amount will be due when the property is no longer my primary residence. Please complete the Financial Information section below and submit supporting documents.

			<b>de 2023 income docu</b> the home during 2024	<b>ments. See below.</b> 4. Include their incomes	in lines 33-39 below.
Name	Age	Relationship	Name	Age	Relationship
32. If applying for	the Abateme	ent or Senior Tax	C Deferral Program, p	blease list any liquid asse	t balances.
Savings	C	hecking	Cash on Hand	CD & Money Market	Other
2023 GROSS II	NCOME -	· INCLUDE IN(	COME FOR YOU &	& <u>ALL</u> PEOPLE LISTI	ED IN ITEM #30.
Yo	u Must At	tach 2023 Inc	come Documents	To Verify These An	nounts.
33. Social Security, railroad retirement benefits and/or other government programs.					\$
34. Gross wages	\$				
25 D .	ф.				

35. Pensions, annuities, V.A. disability benefits and/or trust income.	\$
36. Welfare, unemployment, alimony, IRA disbursements and/or strike benefits.	\$
37. Interest and/or dividends (taxable and non-taxable).	\$
38. Other income (Specify: rent, capital gains, etc.)	\$
39. TOTAL 2023 GROSS HOUSEHOLD INCOME (Add lines 32 through 37).	\$

39. TOTAL 2023 GROSS HOUSEHOLD INCOME (Add lines 32 through 37).

## ALL DOCUMENTS MUST BE SUBMITTED BY: SEPTEMBER 1<sup>ST</sup> **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 State Tax Commission as well as records from any financial institution.

40. Applicant's Signature:

41. Co-Owner's Signature:

42. Date:

(If home is owned in joint tenancy.)

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: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Address:

Signature of Person Preparing This Form: \_\_\_\_\_\_2024 General Tax Relief Application, version 1.0. Rev 12/23