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TAX RELIEF PROPERTY CHANGE
www.co.weber.ut.us/Clerk_Auditor/tax_relief.php



This form must be submitted by Sep 1.
This form is for real property only (not mobile homes)

For Office Use Only
 Abate No: _____
 Initials: _____
 Report No: _____
 Ownership: _____

NOTE: After the deadline to submit this form has passed, we cannot change the tax relief on the property and you must handle any proration for tax relief at closing. See http://www.webercountyutah.gov/clerk_auditor/tax_relief_selling.php

1. Please check the type(s) of relief you applied and qualified for: Circuit Breaker (Must reside in Utah all year to qualify)
 Deployed Military Veteran Blind Mobile Home Abatement (Must live in residence 10 months to qualify)

2. _____
 Applicant's Last Name First Name Middle Name

3. _____
 Spouse's Last Name First Name Middle Name

4. _____ 5. _____
 Phone (Your best number for NEW residence) Email (Current/Best email address for your NEW residence)

6. _____
 Your NEW Mailing Address (the one we should send any correspondence to) City & State Zip Code

OLD Property Information

7. _____ OR _____
 Parcel Number Mobile Home (List Year, Make and Serial Number) Account #

8. _____
 OLD Property Address (the one receiving tax relief) City & State Zip Code

NEW Property Information (Complete A or B)

A. MOVING WITHIN WEBER COUNTY – Your full tax relief benefit will be applied to your NEW residence.

9. _____ OR _____
 Parcel Number Mobile Home (List Year, Make and Serial Number) Account #

10. _____
 NEW Property Address (the one to switch tax relief to) City & State Zip Code

B. MOVING OUT OF WEBER COUNTY – AFTER taxes are paid by the new owner, Weber County will mail you a check.

11. _____
 NEW Residence Address (the one you are moving to) City & State Zip Code

This form must be submitted by September 1st.
After that time, any adjustments will need to be made between the buyer and seller.

OATH AND SIGNATURE

Under penalties of perjury, I declare that, to the best of my knowledge & understanding, the information supplied on this application & all documents attached are true, correct & complete.

12. Applicant's Signature: _____ 13. Spouse's Signature: _____
 (If home is owned in joint tenancy.)

14. Date: _____

If someone other than the applicant is preparing and/or signing the form, please attach a copy of the Power of Attorney