



DUCHESNE COUNTY 2025 TAX RELIEF APPLICATION

ONLY PRIMARY RESIDENCE AND UP TO 1 ACRE

WILL BE ELIGIBLE FOR EXEMPTIONS

Table for County Use Only with rows: Tax Amount, Blind &/Or Veteran, Circuit Breaker, Additional 20%, Low Income Abatement, Net Tax Due

Please CIRCLE the type(s) of relief you are applying for:
Veteran, Active Military, Circuit Breaker/Abatement, Blind, Mobile Home

Applicant Last Name, First Name, Middle Name, Date of Birth, Social Security Number
Spouse's Last Name, First Name, Middle Name, Date of Birth, Social Security Number
Mailing Address, City, State, Zip Code, Phone Number

Parcel/Account Number OR Mobile Home (List Year, Make & Serial #)
YES NO Did you own this property as of January 1, 2025?
YES NO Have you been living in your home since January 1, 2025?
YES NO Is your property in a Trust Agreement? If yes, you must provide a copy for our office if we don't have one.
YES NO Have you filed for any tax relief this year in another county?
YES NO Do you plan on filing for any tax relief in another county?
CIRCUIT BREAKER AND ABATEMENT EXEMPTION
YES NO Will you be age 66 or older before December 31, 2025?
YES NO If under age 66, are you an unmarried widow or widower? If you answered yes, please enter the month and year of spouse's death: _____ A copy of the death certificate must be on file in our office.
YES NO Will you reside at this address for 12 months out of the year? If no, please explain. _____
YES NO Will you live in Utah for the entire Year of 2025?
YES NO Were you financially self-supportive in 2024?
YES NO Does your property exceed one acre? If yes, how many acres? _____
YES NO Do you rent out a portion of your home?
YES NO Do you use a part of your home for business?

2024 GROSS INCOME - For Circuit Breaker and Abatement Applications Only
INCLUDE INCOME FROM ALL HOUSEHOLD MEMBERS
MUST ATTACH COPY OF VERIFIED INCOME DOCUMENTATION

Table with income categories and dollar amounts: Wages, Salaries, Tips, Other Compensation, Oil Royalties; Total Interest, Dividends; Pensions, Annuities; Social Security, Railroad Retirement; Capital Gains, Loss Carry Forwards; Government Assistance; Unemployment, Workers Comp; Business, Rental, Farm Income; Other Income; TOTAL 2024 GROSS HOUSEHOLD INCOME

List All Other Persons Living in Household

Name, Age, Relationship, Name, Age, Relationship
Do you own any other Real Estate? [] YES [] NO If yes, please list location: _____
Do you own any other assets including; savings account, certificate of deposits, etc.? [] YES [] NO
If yes, please list type of assets, current balances, and institute where asset is held. _____

VETERAN WITH DISABILITIES EXEMPTION – Must be a service connected disability

A form from the VA or military branch showing % of disability or unemployable rating must be filed with our office.

I am a veteran, disabled as a result of military service.

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 (must provide a death certificate).

Enter your service related/unemployable disability rating. %

Parcel/Account Number	Real/Personal Property	Taxable Value	Exempt Taxable Value	Taxable Value Balance	Exempt Tax Dollars

ACTIVE or RESERVE MILITARY SERVICE EXEMPTION

Applicant must have served on active duty **outside** of the State Of Utah for 200 days in a calendar year or 200 consecutive days **outside** of the State Of Utah beginning in the prior year.

You must file on or before Sept 1 of the year **after** the year of qualifying service. Qualifying service begins on Jan. 1, 2013.

Verifying military documentation including orders for qualifying active duty service must accompany this application.

Real/Personal Property	Parcel/Account Number	Taxable Value	Exempt Taxable Value	Taxable Value Balance	Exempt Tax Dollars

BLIND EXEMPTION

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

I am legally blind in both eyes.

I am an unmarried spouse or minor orphan of a deceased blind person (must provide a death certificate).

Real/Personal Property	Parcel/Account Number	Taxable Value	Exempt Taxable Value	Taxable Value Balance	Exempt Tax Dollars

FILING DEADLINE IS SEPTEMBER 1st EVERY YEAR

Check one (providing false information subjects the signer to penalties for perjury):

- I am a U.S. citizen and have provided my Social Security Number on the front of this form.
- I qualify under 8 U.S.C. 1641 and I am present in the U.S. lawfully. I-94 Number*: _____

Under penalties of perjury, I declare that I am a U.S. citizen OR that I qualify under 8 U.S.C 1641 and am present in the United States lawfully. I also declare under penalties of perjury, to the best of my knowledge and understanding, this information is true, correct and complete.

Applicant/ Preparer's Information

Signature of Applicant

Date

Preparer's Name & Address (If not applicant)

Telephone Number

**STEPHEN POTTER
Duchesne County Treasurer
PO Box 989
Duchesne, Utah 84021
435-738-1191**

CONTINUED ON OTHER SIDE