

2024 APPLICATION FOR LOW INCOME CIRCUIT BREAKER & INDIGENT PROPERTY TAX ABATEMENT

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For Homeowners and Mobile Home Owners

Circuit Breaker

ACCOUNT #

YOU MUST FILE AN APPLICATION EACH YEAR TO RECEIVE TAX RELIEF

This application is made for abatement of ad-valorem property tax in accordance with U.C.A. § 59-2-Part 12 Property

Indigent

Tax Relief.

The deadline for filing this application with Davis County is September 3

1. Applicant Information	on							
Applicant's Last Name	First		Initial	Date of Birth	Soci	al Securi	ty Number	
Spouse's Last Name	First		Initial	Date of Birth	Soci	al Securi	ty Number	
Mailing Address (Street, Suite #, Apt #)	City, S	State, Zip Code			Tele	phone		
Email	Emerg	gency Contact			Seco	ondary Pl	none Numbe	r
2. Property Information	n							
ResidentialParcel Number:Real PropertyParcel Number:		Mobile Home	e	Vehicle Identificatio	n Numb	er:		
Is any portion of your home rented? Y	N	Is any portion Trade or Bus		home used for		Y	N	
Portion of Home Rented:	%	Portion of P	roperty U	sed for Busines	s?			%
Is this property in a Trust? Y N If Yes, please provide a copy of the Trust								
3. Affidavit								

I hereby certify the following:

I am a United States Citizen.

I am qualified as an alien as defined in 8 U.S.C. 1641 and lawfully present in the United States.

My Alien Registration Number is _____. My I-94 Number is _____.

All applicants must provide copies of immigration documents.

I owned and occupied the residence described on January 1, 2024.

I have not applied for tax relief in any other county in Utah.

I furnished my own financial support in 2023 and cannot be claimed as a dependent on any other tax return.

I am an unmarried surviving spouse (widow/widower). <u>New applicants must provide a copy of Death Certificate.</u> My property exceeds one acre. The total acreage is _____.

Circuit Breaker Requirements (age 66 & older):

I am a home owner age 66 years or older as of December 31, 2024.

I will reside in Utah all of calendar year 2024.

Low-Income Indigent Requirements:

I am a home owner age 65 or younger as of December 31, 2024 I will reside in the home at least 10 months of the current year I am a disabled person less than age 66 (<u>A signed statement from</u> <u>licensed physician documenting the nature and extent of the disability</u>) I am a person with an extreme hardship (<u>Attach statement of extreme</u> <u>hardship</u>)

4. Members of Household List all persons living in the residence and earning income, including yourself, as of January 1, 2023				
Name	Relationship	Age	2023Income	
Name	Relationship	Age	2023Income	
Name	Relationship	Age	2023 Income	

5. Total Gross Household Income – Taxable & Nontaxable

- Applicants must include "total gross income" for all members earning income (including members above).
- Attach a complete copy of all applicable 2023 Federal Tax Return including all schedules and attachments.
- If no applicable 2023 Federal Tax Returns were filed, copies of all income statements for members earning income must be submitted.

Social Security (include Medicare Premium)	\$	
Railroad Retirement, Military Retirement, State Supplemental	\$	
Income		
Gross Wages, Salaries, and Other Employee Compensation	\$	
Unemployment, Alimony, Child Support, and Strike Benefits	\$	
Welfare Payments, Food Stamps	\$	
Pensions, Annuities, and Trust Income	\$	
Distributions from: 401K, Roth's, IRA's, or other sources	\$	
Rent, Business, Farm, or Partnership Income, Royalties	\$	
Interest, Dividends, etc.	\$	
Capital Gains	\$	
Other Income Year Loss/Rental Depreciation	\$	
Earned Income Credit, Additional Child Tax Credit, and other	\$	
Tax Credits		
Other Income (ex. Jury Duty, Prizes, Gambling):	\$	
TOTAL 2023Gross Household Income	\$	
Total Cross Lloussheld Income Amount to Qualify May Not Exceed \$ 40,840		

Total Gross Household Income Amount to Qualify **May Not Exceed \$ 40,840**

6. ALL APPLICANTS MUST SIGN THE APPLICATION

Subject to penalties of perjury and other legal and civil penalties, I declare that the information supplied on this application and all documents attached is true, correct and complete. I further declare that I am a resident of Davis County. I have included the information from all members of the household and authorize Davis 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. A copy of this signed application may be relied on as consent to the inspection or receipt of such records.

Applicant's Signature

Spouse's Signature

7. Filing Deadline is September 1, 2024

The filing deadline for all abatements is on or before September 3, 2024. If any questions please call 801-451-3331or 801-451-3543.

8. Submit the Completed F	orm to: DAVIS	COUN	TY TAX ADMI	NISTRATION		
Mail:	In Person	In Person:		Via Email:		
PO Box 618, RM 101	61 South Main	Street	TaxAdmin@d	aviscountyutah.gov		
Farmington UT 84025	Farmington UT	84025		all documents required		
(FOR COUNTY OFFICE USE ONLY)		Circuit Bro	eaker Abatement	\$		
Received by		Circuit Bro	eaker II Abatement	\$		
Date		Indigent/	Disabled Abatement	\$		

Date

Date