

APPLICATION FOR DEFERRAL OF REAL PROPERTY TAXES

Pursuant to Senate Substitute for House Bill 2923

Application must be filed with the County Treasurer by December 1

APPLICANT INFORMATION *(Please print)*

| | | | | |
|-----------|-------|------|------|----------------|
| Last Name | First | M.I. | Date | ____/____/____ |
|-----------|-------|------|------|----------------|

| | | | | |
|---------|-----------|--------|-------------|------|
| Address | Direction | Number | Street Name | Type |
|---------|-----------|--------|-------------|------|

| | | | |
|------|-------|-----|---|
| City | State | ZIP | - |
|------|-------|-----|---|

| | |
|-----------|----------------|
| Phone () | E-mail Address |
|-----------|----------------|

Is the above address your principal residence? YES NO If NO, then complete the following section.

| | | | | |
|---------|-----------|--------|-------------|------|
| Address | Direction | Number | Street Name | Type |
|---------|-----------|--------|-------------|------|

| | | | |
|------|-------|-----|---|
| City | State | ZIP | - |
|------|-------|-----|---|

| | | | | | | |
|---------------------------|----------------|-----------------------|----------------|-----------------------------|------------------------------|-----------------------------|
| Estimated Deployment Date | ____/____/____ | Estimated Return Date | ____/____/____ | Deployment Orders Attached? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|---------------------------|----------------|-----------------------|----------------|-----------------------------|------------------------------|-----------------------------|

| | | |
|-------------------------------------|------------------------------|-----------------------------|
| Leave & Earning Statement Attached? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|-------------------------------------|------------------------------|-----------------------------|

TAX INFORMATION *(Please print)*

| | | | | |
|----------|---|---------------------------------------|--|---|
| Tax Year | Amount of Taxes Deferred (Do not include any specials) | Full Year <input type="checkbox"/> | First Half <input type="checkbox"/> | Second Half <input type="checkbox"/> |
|----------|---|---------------------------------------|--|---|

| | | | | |
|----------|---|---------------------------------------|--|---|
| Tax Year | Amount of Taxes Deferred (Do not include any specials) | Full Year <input type="checkbox"/> | First Half <input type="checkbox"/> | Second Half <input type="checkbox"/> |
|----------|---|---------------------------------------|--|---|

SIGNATURE

Claimant:

| | | | |
|--------------|--------------------------------|---------------------------------|---|
| Name (Print) | Owner <input type="checkbox"/> | Spouse <input type="checkbox"/> | Attorney-in-fact <input type="checkbox"/> |
|--------------|--------------------------------|---------------------------------|---|

The 2008 Legislature passed Senate Substitute for House Bill 2923, § 4 (a) A person who is in full-time military service of the United States and is or soon to be mobilized or deployed outside of the United States for a period of at least six (6) months solely by reason of military orders, on or before December 1 of the year in which such person files a claim, may elect to defer all or part of the real property taxes for the principal residence for any year in which such person is serving in active military duty for a period not to exceed two years.

(b)...and to waive any interest or penalties related to such deferred real property taxes.

(c) All property taxes shall become payable when the deferral period ends or the property is sold or title of such property is transferred to someone other than the person who made the election pursuant to subsection (a).

The County Treasurer will mail your tax statement on the estimated return date listed, unless notification and documentation has been provided for an extended deployment. You will have 45 days from the postmark to pay without penalty.

Signature _____ Date _____