

ADAMS COUNTY HOMEOWNERS EXEMPTION APPLICATION

(SEC 63-602G Idaho Code)

SITE ADDRESS (House number and Street): _____

PARCEL NUMBER: _____

FOR TAX YEAR: **2018**

Single Family

- Manufactured
- Stick Built
- Townhouse

Multi-Family

- Duplex, Triplex, Fourplex
- Condominium

Commercial

- Commercial Building w/ Living Quarters

NAME(S)/ MAILING ADDRESS: _____

To determine if this is your primary residence and that you qualify for this exemption, please answer the following questions:

- 1.) PURCHASE DATE (M/D/YY) _____ DATE OCCUPIED (M/D/YY) _____ PURCHASE PRICE _____
- 2.) Is this your primary residence? YES NO
- 3.) Do you own other property in Idaho? YES NO If yes, list _____
- 4.) What is the physical address of your previous residence? _____
RENT OWNED OTHER
- 5.) Are you currently receiving this exemption in another county in Idaho? YES NO Where? _____
- 6.) Are you active military? YES NO Where Stationed? _____

To ensure that your contact information is kept current, PLEASE notify our office of ANY changes in the mailing address, if you have moved or will have extended time away from this residence such as leaving Idaho for the winter.

I certify that I am the owner and that I occupy as my primary dwelling place the property herein described. To the best of my knowledge and belief, and under the penalty of perjury, the information I have provided herein is true & correct. I understand that failure to comply with all requirements on or before April 15th will result in denial of this application for this year. I also understand that this information will be verified with the Idaho State Tax Commission.

Date: _____ Signature: _____ Phone Number: _____ - _____

Date: _____ Signature: _____ Phone Number: _____ - _____

Application for this exemption must be made on or before April 15th to the County Assessor, PO Box 46, Council, Id. 83612 TEL: 253-4271 Opt. 2

**FOR
COUNTY
USE ONLY**

Signature of Deputy: _____ Date: _____

Occupancy: YES NO