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Millard County
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2025 TAX RELIEF APPLICATION

Filing Deadline is September 1, 2025

1. Please check the type(s) of relief you are applying for: ☐ Blind ☐ Disabled Veteran ☐ Deployed Military
2. _____
Applicant's Last Name First Name Middle Initial Date of Birth Social Security Number
3. _____
Spouse's Last Name First Name Middle Initial Date of Birth Social Security Number
4. _____
Address City & State Zip Code Telephone Number
5. _____ 6. _____ 7. _____
Parcel Number of Real Property Residence Value **BLIND ONLY:** Tangible Personal Property Value
(From valuation notice) (Optional)
8. ☐ Yes ☐ No Have you filed for any tax relief this year in another county or state? If yes, where? _____
9. ☐ Yes ☐ No Is your property in a Trust Agreement? *If yes, a copy of the Trust must be on file in our office.*
10. ☐ Yes ☐ No (Blind only) I owned and resided on this property on Jan 1, 2024.
11. ☐ Yes ☐ No (Military only) I owned and resided on this property on September 1, 2024.

BLIND EXEMPTION *A verification statement signed by a licensed ophthalmologist must be attached or on file in our office.*

12. ☐ I am legally blind in both eyes. OR ☐ I am an un-remarried spouse or minor orphan of a deceased blind person.
13. ☐ Yes ☐ No Is this property your primary residence?

VETERAN WITH DISABILITIES EXEMPTION *A form from V.A. or military branch showing % of disability or unemployable rating must be attached or on file in our office. If the % of disability changes, please send an updated copy.*

OFFICE USE:

☐ VERIFIED (VA Doc on file)

14. Enter your service related/unemployable disability rating here: _____ %
15. ☐ Yes ☐ No Is this property your primary residence?
16. ☐ I am a veteran disabled as a result of military service. OR ☐ I am an un-remarried spouse or minor orphan of a deceased veteran

DEPLOYED MILITARY EXEMPTION *Evidence of the eligible deployed military service must be attached or on file in our office.*

17. ☐ Yes ☐ No Is this property your primary residence?
18. I was a military member in the military forces of the United State or this State, ☐ deployed for at least 200 calendar days in 2024, OR ☐ deployed for 200 consecutive days across 2023-2024. (If so, please submit your application in 2025.)
19. Qualifying Active Duty military service dates: From: _____ To: _____
From: _____ To: _____

Under penalties of perjury, I declare that I am a lawful resident of Millard County and to the best of my knowledge and understanding, the information provided on this application and all documents attached are true, correct, and complete.

Applicant's Signature

Date

Spouse's Signature

Date

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

Property Tax Credit				
	Blind Exemption	Disabled Veteran's Exemption	Active-Duty Armed Forces Exemption	
	\$11,500 in taxable value	_____ % x \$521,620 \$ _____ in taxable value	Credit equals total taxable value of PRIMARY RESIDENCE (no personal property)	

VA Disability Benefit 2024	
	\$521,620
10%	\$52,162
15%	\$75,243
20%	\$104,324
25%	\$130,405
30%	\$156,486
35%	\$182,567
40%	\$204,648
45%	\$234,724
50%	\$260,810
55%	\$286,891
60%	\$312,972
65%	\$339,053
70%	\$365,134
75%	\$391,215
80%	\$417,296
85%	\$443,377
90%	\$469,458
95%	\$495,538
100%	\$521,620

Abatement of Vehicles and/or Personal Property				
1-Vehicle Information				
2-Uniform fee or tax amount				
3-Tax Rate (area of residence)				
4-Balance Available				
5-Taxable Value				
6-Balance after abatement				
7-Abatement Amount				
Initial/Date:				

Abatement of Real Property- Primary Residence Only		Abatement of Vehicles and/or Personal Property				
1- Tax amount		1-Vehicle Information				
Circuit Breaker		2-Uniform fee or tax amount				
3- 20 % of Market		3-Tax Rate (area of residence)				
4- County Abatement		4-Balance Available				
5- Veteran/Blind Abatement		5-Taxable Value				
6- Net Tax Due		6-Balance after abatement				
Initial/Date:		7-Abatement Amount				
		Initial/Date:				

ALL: The county may ask for verification of residency.

BLIND: *The first \$11,500 of taxable value of real and tangible personal property in this state owned by blind persons, their unmarried surviving spouses, or their minor orphans is exempt from taxation.

 *The first year's application shall be accompanied by a statement signed by a licensed ophthalmologist verifying that:

(a) has no more than 20/200 visual acuity in the better eye when corrected; or

(b) has, in the case of better than 20/200 central vision, a restriction of the field of vision in the better eye which subtends an angle of vision no greater than 20 degrees.

VETERAN w/DISABILITY: *The unmarried surviving spouse or minor orphans of a veteran who was killed in action or died in the line of duty is entitled to the total taxable value of the claimant's primary residence and the tangible personal property that is held exclusively for personal use and are NOT used in a trade or business.

ACTIVE DUTY: **"Military"** includes: United States Army, Navy, Air Force, Marine Corps, or the Coast Guard OR the reserve components of the Army National Guard, Army Reserve, Navy Reserve, Marine Corps Reserve, Air National Guard of the US, Air Force Reserve and the Coast Guard Reserve.
"Qualifying active duty" means: At least 200 days in a continuous 365-day period, regardless of whether consecutive, of active duty military service **outside** the state in an active component of the US military (see above explanation) and have not previously been counted for the purpose of qualifying for the exemption.

Application must be filed in the **year after the year** during which claimant completes service.

A SEPARATE application is required for each qualifying period of service, filed annually, as applicable.