

RICKY HATCH, CPA  
 WEBER COUNTY CLERK/AUDITOR  
 2380 WASHINGTON BLVD., STE 320  
 OGDEN, UT 84401-1456  
 PHONE/FAX: (801) 399-8489  
 EMAIL: TAXRELIEF@  
 WEBERCOUNTYUTAH.GOV

**2025 GENERAL TAX RELIEF**  
 Webercountyutah.gov/Clerk\_Auditor/tax\_relief.php



*Please file early. We may need additional documents.*

**ALL APPLICATIONS MUST BE SUBMITTED BY  
 SEPTEMBER 2nd, 2025**

For Office Use Only	Received By: _____	Notes: _____	Initials: _____
			Report No: _____
			Ownership: _____

1. Parcel Number / Mobile Home Number: \_\_\_\_\_

Address: \_\_\_\_\_  
 Street City & State Zip Code

Property Owner: 2. _____ Last Name First Middle 3. _____ 4. _____ Date of Birth Social Security Number 5. _____ Applicant Phone Number 6. _____ Email	Spouse or Co-Owner: 7. _____ Last Name First Middle 8. _____ 9. _____ Date of Birth Social Security Number 10. _____ Co-Owner Phone Number 11. _____ Email
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

12. I AM APPLYING FOR: Circuit Breaker  Abatement  Blind  Veteran  Disability Rating \_\_\_\_\_% Deferral

For Circuit Breaker & Abatement: Complete lines 1 to 33 and 40 to 42  
 For Blind: Complete lines 1 to 16 and 38 to 42  
 For Veteran: Complete lines 1 to 16 and 40 to 42

13.  Yes  No Is this property your primary residence? *(County may require residency verification.)*  
 14.  Yes  No Did you own this property as of January 1, 2025?  
 15.  Yes  No Is your property in a Trust Agreement? *(If yes, a copy of the Trust must be on file in our office.)*  
 If yes, were there changes to the trust in the past year?  Yes  No *(Please include copy of changes.)*  
 16.  Yes  No Have you filed for any Tax Relief this year in another county or state?  
 If yes, prior address: \_\_\_\_\_

**CIRCUIT BREAKER & ABATEMENT** Additional forms at [https://www.webercountyutah.gov/Clerk\\_Auditor/add\\_tax\\_relief.php](https://www.webercountyutah.gov/Clerk_Auditor/add_tax_relief.php)

17.  Yes  No Will you be age 66 or older before December 31, 2025?  
 18.  Yes  No Are you an unmarried widow or widower? *(First time applicants please submit copy of death certificate.)*  
 If yes, month and year of spouse's death: \_\_\_\_\_  
 19.  Yes  No Are you disabled? *(Submit additional form: Medical Statement signed by your doctor.)*  
 20.  Yes  No Are paying taxes an extreme hardship? *(Submit additional form: Hardship letter if applying for Abatement program)*  
 21.  Yes  No Will you live in Utah for the entire year of 2025?  
 22.  Yes  No Will you reside at this address for 10 months out of the year?  
 If you answered "No" please explain: \_\_\_\_\_  
 23.  Yes  No Did anyone claim you on their 2024 tax return? *(Do you rely on someone else for financial support?)*  
 24.  Yes  No Do you own any other Real Estate? If yes, please list addresses: \_\_\_\_\_

**FINANCIAL INFORMATION** - **Must include 2024 income documents. See below.**

25. Please list all household members living in the home during 2024. Include their incomes in lines 26-33 below.

Name	Age	Relationship	Name	Age	Relationship
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

26. If applying for the **Abatement** or **Senior Tax Deferral** Program, please list any liquid asset balances.

Savings	Checking	Cash on Hand	CD & Money Market	Other
_____	_____	_____	_____	_____

**2023 GROSS INCOME – INCLUDE INCOME FOR YOU & ALL PEOPLE LISTED IN ITEM #25.**  
**You Must Attach 2023 Income Documents To Verify These Amounts.**

27. Social Security, railroad retirement benefits and/or other government programs.	\$ _____
28. Gross wages, salaries, tips, and/or other compensation.	\$ _____
29. Pensions, annuities, V.A. disability benefits and/or trust income.	\$ _____
30. Welfare, unemployment, alimony, IRA disbursements and/or strike benefits.	\$ _____
31. Interest and/or dividends (taxable and non-taxable).	\$ _____
32. Other income (Specify: rent, capital gains, etc.)	\$ _____
33. TOTAL 2023 GROSS HOUSEHOLD INCOME (Add lines 27 through 32).	\$ _____

**SENIOR TAX DEFERRAL – Note: This is not part of the regular Circuit Breaker or Abatement Program.**

34.  Yes  No Will you be age 75 or older by December 31, 2025? (*Submit proof of age.*)  
35.  Yes  No Have you owned your primary residence for a continuous 20-year period as of Jan 1 this year?  
36.  Yes  No Is there a mortgage (including reverse mortgage) or other trust deed on the property?  
37.  *I understand that the Senior Tax Deferral program does not reduce my property taxes. My property taxes will accrue, with interest, and the accrued amount will be due when the property is no longer my primary residence. Please complete the Financial Information section above and submit supporting documents.*

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

38.  I am legally blind in both eyes, OR 39.  I am an unmarried spouse or minor orphan of a deceased blind person. **NOTE:** If you checked box 39, please file the Supplemental Affidavit for unmarried widow(er) or minor orphan. This form is available from our office, or at [https://www.webercountyutah.gov/Clerk\\_Auditor/add\\_tax\\_relief.php](https://www.webercountyutah.gov/Clerk_Auditor/add_tax_relief.php)  
*For blind exemption on personal property (cars, trailers, etc.) please contact our office.*

**OATH AND SIGNATURE ALL DOCUMENTS MUST BE SUBMITTED BY SEPTEMBER 2ND**

Under penalties of perjury, I declare that I am a lawful resident of Weber County and, to the best of my knowledge and understanding, the information supplied on this application and all documents attached are true, correct, and complete. I have included the income from all members of the household and authorize Weber County to inspect and/or receive tax information on household members from any office of the IRS or the State Tax Commission as well as records from any financial institution.

40. Applicant's Signature: \_\_\_\_\_ 41. Co-Owner's Signature: \_\_\_\_\_  
(If home is owned in joint tenancy.)  
42. Date: \_\_\_\_\_ **A Signed Application Needs To Be Filed Each Year by Sep. 2nd To Qualify For The Tax Relief Programs.**

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

Name of Person Preparing This Form: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Address: \_\_\_\_\_

Signature of Person Preparing This Form: \_\_\_\_\_ 2025 General Tax Relief Application, version 1.0. Rev 1/2025