PROPERTY TAX EXEMPTION FOR THE SURVIVING SPOUSE OF A PREVIOUSLY QUALIFIED DISABLED VETERAN – APPLICATION AND INSTRUCTIONS

In 2014 Colorado's legislature expanded the Disabled Veterans Property Tax Exemption to include the surviving spouse of a prequalifying disabled veteran. The surviving spouse must be the owner-occupier of the residence of a qualifying disabled veteran who previously received the exemption and who passed away.

APPLICATION AND ELIGIBILITY REQUIREMENTS:

- The applicant must be the owner-occupier of the property.
- The applicant must be the surviving spouse of a veteran who passed away prior to January 1 of the current year.
- The veteran to whom the applicant was married must have applied for and been granted the disabled veterans property tax exemption as provided by § 39-3-203(1.5)(a), C.R.S., prior to his or her death.

APPLICATION INSTRUCTIONS

1. Identification- Identify the surviving spouse and property in this section. The applicant's social security number is required per § 39-3-205(2)(a)(I), C.R.S.

2. Qualifying Surviving Spouse Status- To qualify, the statements in this section must be true. Read the statements, confirm all are true, and check the boxes.

3. Ownership and Occupancy Requirement- To qualify the statements in this section must be true. Read the statement, confirm it is true, and check the box.

4. Affidavit and Signature- Read the declaration and sign and date the form where indicated. Submit the form to the county assessor where the property is located by July 1.

PROPERTY TAX EXEMPTION APPLICATION FOR SURVIVING SPOUSE OF A QUALIFYING DISABLED VETERAN

CONFIDENTIAL	*County name* *Address* *Address* *Phone, fax and email*

1. Identification of Applicant and Property

Applicant's Name (First, Middle Initial and Last)		Social Security Number	
Property Address (Number and Street Name)		Schedule or Parcel Number (if known)	
City or Town	State **CO**	Zip Code	County
Mailing Address (if different from property address)		Telephone Number	

2. Qualifying Surviving Spouse Status (the following statements must be true.)

a) I am the surviving spouse of a disabled veteran. ☐ **True** ☐ **False**

b) My spouse passed away before January 1 of the current year. ☐ **True** ☐ **False**

c) My spouse qualified for and received the disabled veterans property tax exemption prior to his or her death. ☐ **True** ☐ **False**

3. Ownership Requirement

I am the owner-occupier of the property. ☐ **True** ☐ **False**

4. Affidavit and Signature

I declare, under penalty of perjury in the second degree (§ 18-8-503, C.R.S.), that the information provided on this form and on any attachments is correct.

Signature: _____ Date: _____

Signer is: ☐ Applicant ☐ Guardian* ☐ Conservator* ☐ Attorney-in-fact*

* A court order or power of attorney is required and must be attached if a party other than the applicant signs this form.

Note: You must inform the County Assessor of a change in property ownership or occupancy within 60 days of the change.

Mail, FAX, or deliver this form to your County Assessor by **July 1.** We recommend you **obtain a receipt** when delivering in person or mailing by **certified mail.** You may also call the Assessor to verify the application was received.