

Application for Disabled Veteran's Homestead Tax Credit

Iowa Code Section 425.15

This form must be filed with your city or county assessor by July 1 of each year. Iowa assessors' addresses can be found at the **Iowa State Association of Assessors Web site**.

		Applicant Contact Info	ormation		
Nam	e:				
Phor	ne Number:	eMail:			
Jurisdiction:		Taxing district:		<u></u>	-
I		swear or affirm th	nat I am the owne	er of the following ho	mestead property
described:					
I acquired the property 2102.	perty under the provi	sions of the United States C	Code, 38 U.S.C. }	21.801, 21.802, or 3	38 U.S.C. } 2101,
exceed \$35,000. (For purposes of this o	acome for the last preceding credit, income means taxable cal subdivisions exempt fro	e income for fed	eral income tax purp	
I have not and wil	l not claim during thi	s calendar year, a military s	service tax exemp	ption on any property	located in Iowa.
• •	making a false claim be guilty of a fraudu	for credit or any persons w lent practice.	ho together act w	vith fraudulent intent	to obtain this
Date property was	acquired:		_		
Method acquired:	☐ Deed ☐ Co	ontract	ı)		
		· 1			
7 Add 1033.					
Applicant's Signature:			Date:		
has been ins	stalled <i>OR</i>	the requirement of Iowa Co		8	
Signed:				Date:	
V		must be given to the assess			ty
A 0 0 0 0 0 Y	I recommend	I that this application be	allowed	disallowed	
Assessor Use Only					
	_	assessor (or authorized rep			
Board of Supervisors	Credit	Allowed Disal	lowed		
Use Only				Date:	
	· ·	Representative of the Boar			