

## **BLAINE COUNTY ASSESSOR**

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## **HOMEOWNER'S EXEMPTION APPLICATION**

O۱	wners of Record: Last Name	First Name				
Owner 1 Driver's License #:			Date of Birth:			
			Date of Birth:			
Pr	operty Address:		Parcel #			
Pr	operty Legal Description:					
Mailing Address:			Phone #			
En	nail Address:					
Da	ate of Purchase:	Purchase Price:	Date Occupied:	New Constru	ction: Yes N	0
		<u>Homeowner's Ex</u>	emption Eligibility Declaration			
	the State of Idaho, you must	: occupy the home, have a lo	de 63-602G, to qualify for and maintain the cal address, and declare this property as taxable income, you must file an Idaho St	your primar	y residence. In	
1.	Is there a co-signer on you If yes, an <b>Affidavit of Poss</b>		s required to obtain a full exemption.	Yes	□ No	
2.		e by a Trust? (other than a deing Resident of Trust is requi	eed of trust) ired to obtain an exemption.	☐ Yes	□ No	
3.	• • •	e by a LTD Partnership, LLC, or ng LTD Partnership, LLC, or	or Corporation?  Corp is required to obtain an exemption.	☐ Yes	□ No	
4.	Do you file as a <b>Resident</b> o	n your Idaho State income ta	axes?	Yes	□ No	
5.	Previous Address		Previous State & County			
	•	at this address?  Yes I				
-	r signing this application, I ce omeowner's Exemption:	tify to the Blaine County Ass	sessor that I meet all of the following requ	uirements to	qualify for the	
	3) I have not made ap	s my primary dwelling place	the property herein described; Exemption on any other property, and; rect.			
	wner/Occupant Signature	Date	Owner/Occupant Signature		Date	

Pursuant to Idaho Code 63-602G(5) upon discovery of evidence indicating the existence of an improperly claimed Homeowner's Exemption, the Assessor must assess a recovery of property taxes, plus costs, late charges, and interest.