



# Box Elder County 2025 Veteran's Exemption Form

## Applicant Information

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Last Name

First Name

M.I.

Birth Date

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Property Address

City

State

Zip

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Phone Number

Account Number

SS#


### Please check all that apply

- I am a Disabled Veteran and would like to continue my exemption for 2024
- I will live in Utah for all of 2024
- This home is my primary residence Jan. 1, 2024

Under penalties of perjury, I declare to the best of my knowledge and understanding, that this information is true, correct and complete. I further testify that I am a resident of Box Elder County.

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Signature of applicant

Date

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Received by

Date

**Return this form as soon as possible to:**

**Box Elder County - Auditor's Office  
One South Main  
Brigham City, UT 84302**

**Questions - Please call 435-734-3325**

For Office use only

CB

20 Mkt

Ind

Total