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 and has not remarried.
- 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

<table>
<thead>
<tr>
<th>CONFIDENTIAL</th>
<th>County name</th>
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<tbody>
<tr>
<td></td>
<td>Address</td>
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<td>Phone, fax and email</td>
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</tbody>
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### 1. Identification of Applicant and Property

<table>
<thead>
<tr>
<th>Applicant's Name (First, Middle Initial and Last)</th>
<th>Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property Address (Number and Street Name)</td>
<td>Schedule or Parcel Number (if known)</td>
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</table>

<table>
<thead>
<tr>
<th>City or Town</th>
<th>State</th>
<th>Zip Code</th>
<th>County</th>
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</thead>
<tbody>
<tr>
<td>Mailing Address (if different from property address)</td>
<td>Telephone Number</td>
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### 2. Qualifying Surviving Spouse Status (the following statements must be true.)

- a) I am the surviving spouse of a disabled veteran and I have not remarried.  
  - 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.

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