



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 Information	
<small>PLEASE PRINT</small>	
Name: _____	
Phone Number: _____	eMail: _____

Jurisdiction: _____ Taxing district: _____
I _____ swear or affirm that I am the owner of the following homestead property described: _____

I acquired the property under the provisions of the United States Code, 38 U.S.C. } 21.801, 21.802, or 38 U.S.C. } 2101, 2102.

My spouse and my combined annual income for the last preceding 12-month income tax accounting period did not exceed **\$35,000**. (For purposes of this credit, income means taxable income for federal income tax purposes plus income from securities of state and other political subdivisions exempt from federal income tax.)

I have not and will not claim during this calendar year, a military service tax exemption on any property located in Iowa.

Note: Any person making a false claim for credit or any persons who together act with fraudulent intent to obtain this credit shall be guilty of a fraudulent practice.

Date property was acquired: _____

Method acquired: Deed Contract Other (Explain) _____

Address: _____

Applicant's Signature: _____ Date: _____

I certify that a smoke detector meeting the requirement of Iowa Code section 100.18

- has been installed **OR**
- will be installed within thirty days of the filing of this application.

Signed: _____ Date: _____

Written notification must be given to the assessor upon conveyance of this property or its discontinued used as your homestead.

Assessor Use Only

I recommend that this application be allowed disallowed

Signed: _____ Date: _____

Assessor (or authorized representative)

Board of Supervisors Use Only

Credit **Allowed** **Disallowed**

Signed: _____ Date: _____

Representative of the Board of Supervisors