

ASSESSMENT CODE:									

Montana Disabled Veteran (MDV) Property Tax Relief Application for Tax Year 2017

15-6-311, MCA

Part I. General Information

- Apply by April 15.
- You have to meet income and property ownership/occupancy every year.
- The benefit only applies to your primary residence. For agricultural and timber parcels, the only eligible land is the one-acre home site.
- Once you have applied for the program, we will notify you each year whether you qualify. You will be included in the program's annual income verification until you move from your residence.

Part II. Required Information					
Property Owner Name	Spouse's Name				
Birth Date	Birth Date				
Social Security Number	Social Security Number				
Contact Phone Number	Contact Phone Number				
County					
Applicant's Mailing Address	Applicant's Primary Residence Physical Address				
Did you file a Montana income tax return for tax year 2015 ?	Yes □ No				
Provide your 2015 Federal Adjusted Gross Income (FAGI), ex Include your spouse's income if you are married. (Spouses' in whether they are owners of the property.)	comes are included regardless of\$\$				
Is your only income from social security, veterans' benefits an If yes, include a copy of your social security statement and/or completed application form.	d/or other nontaxable sources? ☐ Yes ☐ No				
If this application is for a mobile or manufactured home, do yo home is located?	·				
Reminder! You must include your 100% disability letter from application. (See Part III, Qualifying Criteria.)	the U.S. Department of Veterans Affairs (VA) with this				

Return your completed and signed application to your local Department of Revenue office. Your application must be postmarked or hand-delivered by April 15. Go to *revenue.mt.gov* and click on *Property Assessment*, then *Contact Us* for the mailing addresses of our 56 local county Department of Revenue offices or call us toll free (866) 859-2254 (in Helena 444-6900). (If you miss the deadline, apply as soon as possible to ensure you are included in the program's verification process for the following tax year.)

Important! Your signature is required in Part IV or Part V.

Part III. Qualifying Criteria

A reduced property tax rate is available for 100% disabled veterans and the unmarried surviving spouse who qualify. You must own or currently be under contract to purchase a home or mobile/manufactured home and live in the home as your primary residence for at least seven months of the year.

Important: You must provide a letter from the U.S. Department of Veterans Affairs (VA) with this application verifying that you are currently rated or paid at the 100% disabled rate for a service-connected disability. If your disability rating is temporary, will periodically ask you to provide an updated verification letter from the VA. The VA cannot give your information directly to us. Surviving spouses must provide letters from the VA verifying that their deceased spouses were rated or paid at the 100% disabled rate at the time of their death or died while on active duty or as the result of a serviceconnected disability.

For tax year 2017, the income guidelines are: A single applicant's Federal Adjusted Gross Income (FAGI), excluding capital and income losses, must be less than \$49,157 and head of household and married applicants' FAGI must be less than \$56,720. Spouses' incomes are included regardless of whether they are owners of the property. Unmarried surviving spouses' FAGI must be less than \$42,855.

You only need to report your income one time. In future years, we will determine your eligibility through our annual verification process.

Part IV. Affirmation and Signature of Montana Disabled Veteran

I affirm that I have been honorably discharged from active service in the armed forces, and I am currently rated 100% disabled or paid at the 100% disabled rate because of a service-connected disability.

Under penalty of law, I/we affirm that I/we are owners of the property on which we are applying for the property tax benefit, that I/we occupied the property as my/our primary residence for at least seven months of a calendar year and that the information provided in this application form is true and correct.

X Property Owner Signature	Date					
X Property Owner's Spouse Signature	Date					
X Signature of Person Completing this Form (if other than applicant)	_ Date					
Printed Name	Phone					
Relationship to ApplicantEmail or Other Contact Information						
Part V. Affirmation and Signature of Surviving Spouse of Montana Disabled Veteran I affirm that I am the surviving spouse of a veteran who was rated 100% disabled or paid at the 100% disabled rate as a result of a service-connected disability at the time of death, died while on active duty, or died as a result of a service-connected disability, and I have remained unmarried.						
Under penalty of law, I affirm that I am the owner of the property on which I am apply I occupied the property as my primary residence for at least seven months of a caler provided in this application form is true and correct.						
X Property Owner Signature	Date					
X Signature of Person Completing this Form (if other than applicant)	_ Date					
Printed Name	Phone					
Relationship to ApplicantEmail or Other Contact Information						
Please let us know how you heard about the Montana Disabled Veteran Property Ta	x Relief Program (MDV).					

Questions or Need Help? Please call us toll free at (866) 859-2254 (in Helena, 444-6900) or visit our website at revenue.mt.gov.