



2026 SENIOR DEFERRAL APPLICATION

Application must be filed annually by September 1st

Cache County Clerk/Auditor-Tax Administration
179 N. Main, Suite 112 Logan, UT 84321
Phone: 435-755-1706 * Fax: 435-755-1980
Email: taxrelief@cachecounty.gov

Primary Residence Parcel #

Primary Residence Value

For Office Use Only
ID#: _____
Abate Type: _____
Ownership: _____
Initials: _____

APPLICANT

Applicant's Last Name	First Name	Middle Name	Date of Birth	Social Security Number
Spouse's Last Name	First Name	Middle Name	Date of Birth	Social Security Number
Property Address	City	State	Zip Code	
Phone Number	Email	Mobile Home Acct# (Year/Make)		

If the property is held in a trust, a copy of the current trust agreement must be on file with our office before relief may be granted.

AFFIDAVIT

I/We hereby certify the following: *(mark all which apply)* I am a United States Citizen

I am a qualified alien as defined in 8 U.S.C., Sec.1641 and lawfully present in the United States.
My Alien Registration Number is _____. My I-94 Number is _____
(New applicants who are qualified aliens must provide copies of their immigration documents)

I am a homeowner age 75 years or older before December 31st *(New applicants must provide proof of age)*

Ownership requirements *(all applicants must fill this section out)*

I owned and occupied the residence described above on January 1st as my primary residence

The assessed value of my single family residence is no greater than the Cache County median property value of:

Attached **\$309,309** Detached **\$483,838** **OR**

Subject property has been my primary residence for 20 consecutive years or more

I have not applied for tax relief in any other county in Utah

Income and Assets *(Applicants must complete this section & submit requested documents)*

Value of household liquid assets _____ Prior year tax liability _____
Liquid assets must be less than 20x's the preceding calendar year tax liability on the property

My household income did not exceed **\$88,442** in the preceding calendar year

Property Liens *(all applicants must fill this section out)*

In order for my deferral to be considered, I will provide written approval/permission to participate in the deferral program from each mortgage company/reverse mortgage company and any outstanding trust deeds.
SUBMIT LIEN RELEASE PT-033a

Mortgage Company: _____ Address: _____
Approximate balance: _____ Account Number: _____
Maturity Date: _____ Monthly payment: _____

OR I have no mortgage loan secured by my primary residence or outstanding trust deeds.

I currently have no delinquent taxes, tax notice charges, outstanding penalty, interest or other costs due on my property.

I acknowledge that if my application is approved a lien will be recorded on my property for the taxes, interest, and recording fee.

LIST ALL PERSONS LIVING IN HOME INCLUDING YOURSELF AS OF JANUARY 1st

Attach separate sheet for addition household members

Name	Age	Self	Name	Age	Relationship
Name	Age	Relationship	Name	Age	Relationship
Name	Age	Relationship	Name	Age	Relationship

PRIOR YEAR 2025 HOUSEHOLD INCOME (all household members)

Include all income of all members of the household. Submit copies of all year-end income statements, prior year federal tax return including all W2s, 1099s, schedules, documents used to process your tax return, and January 1-December 31 statements from ALL financial institutions. (NOTE: Any adult household member who cannot provide the above listed documentation must submit an IRS wage and income transcript and/or Social Security earnings history).

Check here if you did not file a Federal Tax Return last year

- Social Security, Medicare, Railroad Retirement, or Military Retirement
- Pension benefits (including Veterans Disability Compensation)
- Wages, salaries, tips and other compensation (W-2, 1099, 1040 Schedule C)
- Dividend and interest income including any nontaxable interest received
- Annuities and trust income received
- Capital gain or loss
- Withdrawals and distributions from 401(k), 457, or IRA accounts
- Unemployment, Worker's Compensation and strike benefits
- Welfare, alimony and child support
- Business and rent income: Rent ___% Business ___%
- Other income i.e. lottery, gambling, inheritance, sale of property, loss carry forwards, residential depreciation, earned income credit, other credits etc.
- Subtotals

Household Member 1	Household Member 2	Household Member 3	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			/ year
			/ year
			/ year
			/ year
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			/ year
			/ year

*Additional household members must complete a supplemental income disclosure **Total Household Income**

HOUSEHOLD ASSETS (all household members)

Attach copies of all household asset statements that reflect end of prior year balances. Also, provide closing statements on all accounts closed prior year.

- Checking accounts _____
- Any savings and credit union accounts _____
- Balances in 401(k), 457, and IRA accounts _____
- Market value of investment accounts (All balances in annuity, NOW, mutual funds, etc.) _____
- Securities (including stocks and bonds) _____
- Trusts (value of assets) _____
- Partnerships and other business interests _____
- Describe rental property or real estate other than the residence on which relief is requested _____

OATH AND SIGNATURE

Under penalties of perjury and other legal and civil penalties, I declare that I am a lawful resident of Cache County and a legal U.S. citizen. To the best of my knowledge and understanding, the information supplied on this application and all documents attached are true, correct and complete. I agree and understand that the information provided is subject to verification by Cache County as a consequence of this application for tax relief. I have included the income from all members of the household and authorize Cache County to inspect and/or receive confidential information on household members from any office of the IRS or the Utah State Tax Commission as well as records from any financial institution. A copy of this signed application may be relied on as my consent to the inspection or receipt of such records.

Applicant _____ Date _____ Spouse _____ Date _____
(if home is owned in joint tenancy)

If someone other than the applicant is signing the form, attach a copy of the Power of Attorney

Preparer Print _____ Preparer Sign _____ Date _____

Preparer Address _____ Preparer Phone Number _____

- Email the completed form and related financial documents to: taxrelief@cachecounty.gov OR
- Mail or deliver the completed form and related financial documents to:
 Cache County Tax Administration Department | 179 N Main Logan Suite 112, UT 84321
 Website: <https://www.cachecounty.gov/tax-administration/abatement/>