



APPLICATION FOR PROPERTY TAX EXEMPTION

Davis County Board of Equalization

61 S Main Street, Room 101

PO Box 618

Farmington, UT 84025

Phone (801) 451-3329

Fax (801) 451-3511

This application is made for exemption from ad-valorem property tax in accordance with U.C.A. §§ 59-2-1101 and 1102.

Nonprofit Entity Information		
Name of Organization applying	EIN, SSN, or other Tax ID Number	Tax Year 2024
Mailing Address (Street, Suite #, Apt #)	Contact Person	
City, State, Zip Code	Telephone Number	
Email		
Exemption Information		

1. This property or these properties are exclusively used for:

- Religious Purposes
 Charitable Purposes
 Educational Purposes

2. Describe the purpose for which the nonprofit entity is organized:

3. Describe why this property or these properties should be excluded from ad valorem taxes:

4. Attach the following documentation:

1. A certified copy of the Articles of Incorporation for the nonprofit entity.
2. A copy of current by-laws and/or other organizational information.
3. A copy of most recently filed IRS tax returns, including a copy of the 501(c)(3) certification issued by the IRS.
4. Completed schedules as appropriate (check all that apply):
 - SCHEDULE A** – Real Property (one schedule for each parcel or real property for which exemption is claimed).
 - SCHEDULE B** – Personal Property used exclusively for religious, charitable, or educational purposes.
 - SCHEDULE C** – Financial Information related to the property under consideration (complete only applicable portions).
5. Signed and notarized certification page.



SCHEDULE A - APPLICATION FOR REAL PROPERTY EXEMPTION
 Complete a separate Schedule A for each parcel of real property under consideration.

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Property Owner Information		
Full name of the owner of record	EIN, SSN, or other Tax ID Number	Tax Year 2024
Property Address (Street, Suite #, Apt #)	Contact Person	
City, State, Zip Code	Telephone Number	
Property Information and Description		
Property Location	Property Parcel Number	
Brief description of property		
Date the property was acquired	Acreage: _____	<input type="checkbox"/> Actual <input type="checkbox"/> Approximate

Use of Property			
1. List separately and describe each building or physical structure located on the property:			
2. Using the space below, describe in detail all activities and functions for which the property is used and give the date and length of each activity or function. Describe separately for each building or structure:			
Use: Activities or Functions (describe in detail):	Portion or (%) of Building used:	Approximate hours per month used:	Date use commenced:
3. Have the above activities and functions continued without interruption since the use first commenced until the present? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain any interim or non-use:			
4. Is there any use of the property, buildings, or structures other than described? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:			
5. Is the property, buildings, or structures or any part thereof rented or leased? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please answer the following:			
a. To whom is the property rented or leased? _____			
b. Describe the portion being rented or leased. _____			
c. What is the amount of rent or other compensation received? _____			
d. How is the amount of rent or compensation determined? _____			
6. Attach the following items:			
a. A copy of the legal description of the property under consideration.			
b. A current photograph of the real property under consideration.			



SCHEDULE B – APPLICATION FOR PERSONAL PROPERTY EXEMPTION

Davis County Board of Equalization

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Complete a separate Schedule B for EACH PERSONAL PROPERTY ACCOUNT under consideration.
In accordance with U.C.A. §§ 59-2-1101 and 1102

Property Owner information		
Full name of owner of record:	EIN, SSN, or other Tax ID number:	Tax Year: 2024
Mailing address: (Street, Suite # or Apt #)	Personal Property account number: (if any)	
(City, State, Zip Code)	Telephone number:	

Property Information
Property location:
Briefly describe the Personal Property under consideration for exemption:

List the original acquisition cost and year acquired. Estimate current value for items with unknown acquisition cost.	Year Acquired	Acquisition Cost	Estimated current value for Acquisition
Furniture & Fixtures:			
Commercial & Industrial Equipment:			
Mobile Homes:			
Other Personal Property:			

List all motor vehicles under consideration for exemption , including passenger cars, trucks and vans, motorcycles, scooter, campers, motor homes, travel trailers and other RVs, boats and watercraft, aircraft, medium or heavy duty trucks, and utility trailers.						
License Plate No.	Type of Vehicle	Year	Make	Model	VIN/HIN	Location

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SCHEDULE C - APPLICATION FOR EXEMPTION – BENEFACTORS

Davis County Board of Equalization

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Complete a separate Schedule C for EACH PERSONAL PROPERTY ACCOUNT AND/OR EACH PARCEL under consideration In accordance with U.C.A. §§ 59-2-1101 and 1102

Property Owner table with fields: Full name of the owner of record, EIN, SSN, or other Tax ID number, Tax year (2024), Address (Street, Suite #, Apt #), Contact person, (City, State, Zip Code), Telephone number, Property Location, Property Parcel and/or Personal Property Acct. number

Financial Information

1. Does the use of the property in any way create funds, revenue, products or services that are sold or given away? [] Yes [] No

If yes, state the amount and describe in detail: \$

Blank lines for answer to question 1

2. If you answered yes in question 1, what portion of funds, revenue, products or services:

a. Are used directly for the purposes for which exemption is claimed? _____ %

Describe the individuals or organizations receiving benefits, and how they are selected:

Blank lines for answer to question 2a

b. Are used indirectly for the purposes for which exemption is claimed? _____ %

Describe the individuals or organizations receiving benefits, and how they are selected:

Blank lines for answer to question 2b

c. Are given to any shareholder or individuals or are distributed from the use of the property?

Explain in detail: _____ %

Blank lines for answer to question 2c

3. Does anyone receive compensation in wages, goods, services or other benefits, for services rendered with respect to the property? [] Yes [] No

If yes, attach the following information for each individual:

- a. Total compensation received in detail, e.g., money, goods, living quarters, services or other benefits.
b. How to compensation is determined.
c. Explanation of the services performed, including duties and working hours.
d. Relationship of the individual to the owner, user or operator of the property, and whether the individual is a trustee, director, shareholder, lessor, member, employee, or contributor of the owner.

Attachments: Attach the following documentation

- 1. Copies of any financial statements, income statements, profit and loss statements or other records that accurately reflect the use of the described property, including the source of all funds, the amount received from each source and the use of such funds for the most recent fiscal year available.
2. All information requested in question 3 above.
3. If the use of the property did not create any funds, revenue, products or services that are sold or given away, but did result in a benefit to any individual or organization, attach detailed documentation indicating the following:
a. All individuals or organizations benefited.
b. The amount of benefit received by each.
c. How such individuals or organizations were selected.

Certification:

I certify that all of the information in this Application, in Schedules A, B, and C to this Application, and in all of the accompanying statements and documents provided in connection with this Application and/or Schedules A, B, and C (collectively, the "Application Records") are true, correct, and complete to the best of my knowledge. I agree that I will promptly notify the Davis County Board of Equalization of any change occur to the property or properties described in the Application Records and that is contrary to the information set forth in the Application Records. I further certify that I am an authorized representative of the organization or entity identified herein, and that I have the authority to sign this Application.

Signature

Title

Please print name

Date