

AFFIDAVIT OF SURVIVING SPOUSE
FOR PROPERTY TAX EXEMPTION
PURSUANT TO NEVADA REVISED STATUTE 361.080

For Assessor Use Only:	System#:
Name:	_____
Date Received:	_____ Received by: _____

I, the undersigned, hereby affirm that I am a bona fide resident of the State of Nevada (six months minimum or possess a valid Nevada Driver's License or Identification Card), and I meet all requirements for the exemption as a surviving spouse, and that I have not claimed this exemption in any other county in the State of Nevada.

A surviving spouse is not entitled to this exemption in any fiscal year beginning after his/her remarriage, even if the remarriage is later annulled.

I wish to apply my exemption for the 2014/2015 fiscal year of 1,250 in assessed value to:

Assessed Value has been adjusted according to C.P.I. per NRS 361.080

Real Property for Assessor Parcel Number (APN): _____

To apply your exemption to your real property tax bill, you must return the affidavit by June 15th prior to the start of the fiscal year. Each fiscal year runs from July 1 to June 30.

CC: RP

DMV/Governmental Services Tax (*when registering a vehicle you own*)

Manufactured/Mobile Home, Aircraft or Business Personal Property for personal property identification

number: _____

Documentation required for this exemption include a photocopy of your Nevada Driver's License or Identification card and a photocopy of your spouse's death certificate.

Note: This document must be signed before a Notary Public or a staff member of the Assessor Office

A person who files a false affidavit or produces false proof to the County Assessor and obtains an exemption is guilty of a gross misdemeanor.

Print Name: _____

Date: _____

Mailing Address: _____

Phone: _____

City State Zip: _____

Name of Spouse: _____

Signature: _____

Date of Death: _____

STATE OF NEVADA
COUNTY OF _____

On this _____ day of _____, _____ personally appeared before me, a Notary Public _____ personally known or proven to me to be the person whose name is subscribed to the above instrument who acknowledged that he executed the instrument.
WITNESS my hand and official seal.

_____, Notary Public

Return this affidavit with required documentation to:

Michael E. Clark, Washoe County Assessor, ATTN Public Service, PO Box 11130, Reno, NV 89520-0027