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Request for Property Classification to be changed from Primary Residential to Secondary Residential

PROPERTY OWNER INFORMATION

Property Owner(s) Name	Home Phone	Work Phone
Property Owner Address		
City	State	Zip

PROPERTY INFORMATION

Property Parcel Serial Number for Subject Property	Tax Year
Location or Address of Subject Property	

USE OF PROPERTY

Describe the Current Use of the Subject Property and State If You Have Personal Knowledge of Such Use: _____

- Yes ___ No ___ Owner(s) currently resides on the Subject Property.
- Yes ___ No ___ Owner(s) spouse and children reside on the Subject Property.
- Yes ___ No ___ Owner(s) claims a residential property exemption on another property.
- Yes ___ No ___ Property is being leased to a tenant as a full time residence.

SIGNATURES

I understand that the Residence will no longer receive the benefit of the Primary Residential Exemption and will be taxed at full market value.

Signature of Property Owner(s)

Date

X

X