



Short Form: Property Tax Exemption for Seniors

Confidential

City and County of Denver
Assessment Division
201 West Colfax Ave., Department 406
Denver, CO 80202
Phone 720-913-4000 Fax: 720-913-4101

1. Applicant's First Name, Middle Initial, and Last Name		Social Security Number	Date of Birth
2. Property Address (number & street name)		Schedule or Parcel Number	
3. City or Town	State CO	Zip Code	Telephone Number
4. Mailing Address (if different than property address)			
5. Age, Occupancy, and Ownership Requirements			
<i>Each question must be answered "True" to qualify for using this form. If any question is answered "False", please see comments regarding the "Long Form Qualifications" in #5 on the back of this form.</i>			
As of January 1 of this year, I am at least 65 years old.		<input type="checkbox"/> TRUE	<input type="checkbox"/> FALSE
I am the owner of record for the property described above, and I have been the owner of record for at least 10 consecutive years prior to January 1 of this year. (I either own the property myself, or I own it jointly, or as a tenant in common with another owner(s).)		<input type="checkbox"/> TRUE	<input type="checkbox"/> FALSE
I occupy the property described above as my primary residence, and I have done so for at least 10 consecutive years prior to January 1 of this year.		<input type="checkbox"/> TRUE	<input type="checkbox"/> FALSE
6. Each additional person who occupies the property as his/her primary residence must be listed here. (Attach an additional sheet if necessary.)			
Person who also occupies property as primary residence	Spouse <input type="checkbox"/> Yes <input type="checkbox"/> No		Social Security Number
Person who also occupies property as primary residence			Social Security Number
Person who also occupies property as primary residence			Social Security Number
7. Affidavit and Signature			
I declare, under penalty of perjury in the second degree (18-8-503, C.R.S.), that the information I provided on this form and on any attachments is correct.			
Signature: _____		Date: _____	
Signer is: <input type="checkbox"/> Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Guardian <input type="checkbox"/> Conservator <input type="checkbox"/> Attorney-in-fact			
If signer is guardian, conservator or attorney-in-fact, you must provide authorization in the form of a court order or power of attorney.			
Other Contact: _____		Telephone Number: _____	
(relative, personal representative, etc.)			

The assessor must be notified of changes in property ownership or occupancy within 60 days after the change occurs.

The deadline for mailing your form to the assessor is July 15.

You will be notified of the assessor's determination in writing by August 15.

**We strongly advise you to send your application by Registered or Certified mail so you have proof of a timely filing.
Or, you can deliver your application to the Assessor's Office and receive a receipt.**

City & County of Denver

Senior Property Tax Exemption in Colorado—Short Form

Short Form Qualifications

Applicants who meet each of the following requirements should use the Short Form. The application deadline is **July 15**.

- **Age Requirement:** You are 65 years old or older as of January 1 of the year for which you are seeking exemption.
- **Ownership Requirement:** You are the current owner of record, and you have owned the property for at least 10 consecutive years prior to January 1 of the tax year for which you are seeking the exemption. (You do not have to be the sole owner of the property. You can own it with your spouse or with someone else.)
- **Occupancy Requirement:** You occupy the property as your primary residence, and you have done so for at least 10 consecutive years prior to January 1 of this year.

Short Form Instructions

1. Please provide your name, social security number and date of birth. (Your spouse should be identified in section 6, even if he or she also qualifies.)
2. Identify the property address and its schedule or parcel number. (See your tax bill or Notice of Valuation.)
3. List the city or town and zip code of the property, and a telephone number where you can be reached.
4. List your mailing address here if it is different from your property address. **(If your mailing address is not located in the same community, please attach an explanation.)**
5. In order to use the Short Form, all three questions under Age, Occupancy, and Ownership Requirements must be answered “True”. If any questions are “False”, please contact the Assessor’s Office and request a Long Form (used for properties held in Trust, Partnerships, or by surviving spouses. Also for seniors temporarily confined to assisted living facilities or displaced by eminent domain.)
6. Each additional person who occupies the property as his or her primary residence must be listed here, along with his or her social security number. The form will be kept confidential. If your husband or wife occupies the property, he or she must be listed on the first line and identified as your spouse. If more than three additional people occupy the property, attach an additional sheet with their names and social security numbers.
7. You must sign and date the form. If the form is signed on behalf of the applicant by a guardian, conservator, or attorney-in-fact, that person must provide documentation of his or her authority in the form of a court order or power of attorney. If there is a contact person other than the applicant, please provide the name and telephone number of that person.

Submit your application no later than July 15 to the County Assessor at the address listed below.

**City & County of Denver
Assessment Division – Attn: Seniors
201 West Colfax Ave., Department 406
Denver, CO 80202**

You will be notified of the assessor’s determination in writing by August 15.

If you have any questions, please contact the Denver Assessor’s Office at 720-913-4000.

We strongly advise you to send your application by Registered or Certified mail so you have proof of a timely filing.