

Oregon Active Duty Military Service Member's Exemption Claim

[Oregon Revised Statute (ORS) 307.286-307.289]

Instructions

- Complete **either** Part 1 **or** Part 2 of this claim form, **not both**. See the back of this form for further filing instructions.
- If you are claiming an exemption on your primary residence, file this form and attachments with the **county assessor** on or before **August 1** following the end of the tax year for which you're claiming.
- **If you are a service member**, you must attach your military orders showing your federal active duty service under Title 10 or deployment under the Emergency Management Assistance Compact. See Part 1 of the instructions on the back of this form for more information.
- **If you are a lawful occupant**, you must attach proof of occupancy and documentation showing the deceased service member's active duty service and the date the service member died. See Part 2 of the instructions on the back of this form for more information.

For assessor's use only			
Date received	Received by	Late filing fee paid \$	Check number
Map	Account number	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Briefly give reason for denial			

Claimant section

I am claiming an exemption for tax year(s) 20 _____.

Name of claimant		County where home is located	
Mailing address	City	State	ZIP code
Location of property for which exemption is sought (street address)	City	State	ZIP code

Part 1—Claim for exemption by a qualified service member

ORS 307.286(1) requires the service member to be serving in the Oregon National Guard or military reserve and then perform at least 179 consecutive days of service under Title 10 or under the Emergency Management Assistance Compact (EMAC). You may claim exemption for each tax year during which you served at least **one day** of your qualified service. You must be serving in the Guard or reserves and be ordered to federal active duty or deployed under EMAC to qualify for this exemption. If you are in regular active enlistment or on a regular tour of duty, you don't qualify for this exemption.

1. I am serving: In the Oregon National Guard In the military reserve
2. I will perform or have performed service for **more than 178 consecutive days**:
 Under Title 10 of the U.S. Code Under the Emergency Management Assistance Compact
3. I was ordered to federal active duty (Title 10 status) or deployed under the Emergency Management Assistance Compact on or after January 1, 2005.
 *Beginning date of service: _____ Actual (from DD-214) or scheduled ending date of service: _____
 *Note: Use your "Report to Home Station" date for your beginning date of federal active duty service under Title 10.
4. I have attached my military orders or other documentation (for example, a letter on military letterhead) to show evidence of the required number of active service days. I have attached my:
 Military orders Other: _____

Part 2—Claim for exemption by a lawful occupant of the homestead of a qualifying active duty service member

1. Name of the deceased active duty service member who owns the home you are occupying: _____
2. Check to indicate that you are lawfully occupying this home. You must attach proof of occupancy (for example, a copy of your current driver's license, property tax statement, voter registration card, etc.).
3. You must attach documentation (for example, service member's DD-214, a letter on military letterhead, or other military-issued report) to this claim. Check to indicate that you have attached the required documentation to show **both** of the following:
 The deceased service member's federal active duty service under Title 10, or service under the Emergency Management Assistance Compact; **and**
 The date the qualifying service member died while performing qualified service.

Declaration

I declare under penalties of false swearing [ORS 305.990(4)] that I have examined this document and attachments, and to the best of my knowledge, they are true, correct, and complete.

Signature of service member X	Date / /	Telephone number ()
Signature of lawful occupant of homestead X	Date / /	Telephone number ()