

## SENIOR VALUE PROTECTION OPTION APPLICATION

_____		_____	
Owner's Name		Parcel or Account Number	
_____			
Mailing Address	City	State	Zip
_____			
Address of Property		City	

### Application Period: January 1 through September 1

**Deadline for applications AND supporting documentation is September 1**

The Senior Value Protection Option freezes the valuation used to calculate property taxes. If you qualify for the protection option, your taxes are not frozen and continue to be levied at the same rate as all other properties in the taxing district. The freeze only applies to the limited property value of your property. If your application is approved, the valuation of the primary residence will remain fixed for a three year period. To remain eligible, you are required to renew your application every three years.

### **Requirements for Applicant**

To prevent delays in processing your application, please ensure that you meet the following requirements and provide any documentation listed below.

- \_\_\_\_ 1. Minimum age of 65 for at least one owner on title.
- Provide a **copy** of one of the following: Driver's License, Birth Certificate or Passport
- \_\_\_\_ 2. Income from all sources of TAXABLE and NON-TAXABLE income should not be greater than \$38,112 for one owner or \$47,640 for two or more property owners for application year 2021.
- Provide **copies** of your signed, federal 1040 tax returns **or** provide other documentation to support income for previous three years: 2018, 2019 **and** 2020.
- \_\_\_\_ 3. The owner must have resided in the primary residence for at least two (2) years prior to applying for the option.
- If applicable, please provide a list of all other properties owned, include parcel number and the city and state in which the parcel is located.

**I HAVE READ THE ABOVE AND HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.**

Property owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

**Submit application and supporting documentation:**

**By mail: Coconino County Assessor's Office, 110 E Cherry Ave, Flagstaff, AZ 86001**

**By email: [assessor@coconino.az.gov](mailto:assessor@coconino.az.gov)**