

County number: \_\_\_\_\_

County name: \_\_\_\_\_

Treasurer name: \_\_\_\_\_

Treasurer email: \_\_\_\_\_

**Homestead and Disabled Veteran**

**Submit on or before November 1, 2022**

Fiscal Year (FY) 23 Claims are based on property assessed in 2021, for taxes payable in FY 2022 – 2023, using the estimated funding rate of 100%. Amended claims are due on or before June 30, 2023.

Is this an amended claim?

Yes

No

**Homestead Claim:**

Number of qualified claimants: \_\_\_\_\_

Homestead claim: \$ \_\_\_\_\_

**Disabled Veterans Claim:**

Number of qualified claimants: \_\_\_\_\_

Disabled Veterans claim: \$ \_\_\_\_\_

**Total Homestead and Disabled Veterans Claim:**

**Total claim requested:** \$ \_\_\_\_\_

I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this affidavit, and, to the best of my knowledge and belief, it is true, correct, and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return by email to: [IDRLocalGov@iowa.gov](mailto:IDRLocalGov@iowa.gov)

Return by mail to: ATTN Local Government Services  
Iowa Department of Revenue  
PO Box 10465  
Des Moines IA 50306-0465