

## **AFFIDAVIT OF SURVIVING SPOUSE**

Date Received

## FOR PROPERTY TAX EXEMPTION

PURSUANT TO NEVADA REVISED STATUTE 361.080

I, the undersigned, hereby affirm that I am a bona fide resident of the State of Nevada (six months minimum or possess a valid Nevada Driver's License or Identification Card), I meet all requirements for the exemption as a surviving spouse under NRS 361.080 and I have not claimed this exemption in any other county in the State of Nevada

Nevaua.			#: ed by:
		se is not entitled to this exemption in any fiscal year beginning after any remarriage, even s later annulled.	
I wish to Assessed	apply my ex Value has been a	xemption for the 2024/2025 fiscal year of 1,720 in assessed value to: adjusted according to C.P.I. per NRS 361.080	
To for yea	apply your exem property acquire rr. Each fiscal ye	for Assessor Parcel Number (APN):  uption to your real property tax bill, you must return the affidavit by June 15 <sup>th</sup> prior to the start of the fiscal year or d between June 15 and June 30, a property owner has until July 5 to claim the exemption for the current fiscal pear runs from July 1 to June 30. Any applications received after these deadlines in which Real Property is applied to the property taxes for the 2025/2026 fiscal year.	☐ CC: RP for 2025/2026
You	ı may apply the e	ental Services Tax exemption to a vehicle registration with the Nevada Department of Motor Vehicles on a vehicle that you own that ate due during the current fiscal year.	☐ Exemption Card Printe
□ Ма	nufactured/l	Mobile Home, Aircraft or Business Personal Property Account Number:	
photocopy  Note: Thi	of your spous	for this exemption include a photocopy of your Nevada Driver's License or Identification case's death certificate.  Int must be signed before a Notary Public or a staff member of the Assess affidavit or produces false proof to the County Assessor and obtains an exemption is guilty of a gross mis	or Office
•		Today's Date:	
Mailing	g Address: _	Phone Number:	
City	State Zip: _	Name of Spouse:	
Emai	l Address: _	Date of Spouse's Death:	
;	Signature:		
	F NEVADA OF		
before me or proven instrument	, a Notary P to me to be t who ackno	of, personally appeared  ublic personally known the person whose name is subscribed to the above wledged that he/she executed the instrument.  nd official seal.	
		, Notary Public	

Return this affidavit with required documentation to:

Chris S. Sarman, Washoe County Assessor, ATTN Public Service, 1001 E. 9th St, Reno, NV 89512