

2024 Form OR-PTDA

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For official use only
Date received at county
Date received at Revenue

Property Tax Deferral Application

(ORS 311.666-701)

Oregon Department of Revenue

Complete this application in full and attach a copy of your 2023-24 property tax statement and, if applicable, your Social Security Disability award letter (see instructions). File your completed application with the county assessor's office after January 1 and by April 15. See the instructions for more information.

Applicant section

Type of applicant Individual* *If individual applicant: Are you married? No Yes Spouse's name/SSN:
Joint spouse Joint other Refiling as surviving spouse. Spouse's SSN/Deferral account number:
Downsizing Add a spouse Filing as a disabled heir

Applicant's name (last, first, MI) Social Security number (SSN) Date of birth Age on April 15 Are you disabled? Yes No

Joint applicant's name (last, first, MI) Spouse Other Joint applicant's SSN Date of birth Age on April 15 Are you disabled? Yes No

Current residence address (where you currently receive your mail) City State ZIP code

Property's physical address City State ZIP code

If property's physical address is different than your current residence, explain why:

Phone Email

Additional family or friend's name

Family or friend's phone Family or friend's email

If you own a manufactured structure (mobile home), complete this section:

Model year Make Home ID number Serial number

1. Have you previously been approved for Property Tax Deferral on this property? Yes No
If yes, was this property under the program prior to 2011? Yes No

2. Does your property contain multiple units? Yes No If yes, how many units?
What is the purpose of the other unit(s)?
Describe which homestead (unit) you live in

3. As of April 15, 2024, how many years have you owned the home? years
As of April 15, 2024, how many years have you lived in the home? years
If your answer to either of the above questions is less than five years, see Form OR-PTDA Instructions. If you have been on deferral and feel you meet the criteria for the Downsizing Provision, contact us for the Downsizing Provision worksheet.

4. Do you have a reverse mortgage that is secured by this home? Yes No
If you answered "yes," to the above question Stop here, and refer to Form OR-RMI for further instructions before you complete your application.

5. Is the home insured for fire and other casualty? Yes No
If your answer to the above question is no, Stop here. You don't qualify for the Property Tax Deferral program.

Insurance carrier (Required) Policy number (Required)

6. Is the property owned in a trust? Yes No
If yes, attach a copy of the trust documents.

7. Do you owe prior years' property taxes? Yes (See Delay of Foreclosure application) No

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Table with 3 columns: Applicant's last name, First name and MI, SSN; Joint applicant's last name, Joint applicant's first name and MI, Joint applicant's SSN.

Annual 2023 combined household income worksheet (Required)

Table with 15 rows listing income sources (Wages, Interest, Business net income, etc.) and their corresponding amounts in a grid format.

If your 2023 total household income (line 15) is more than \$58,000, Stop here. You don't qualify for the Property Tax Deferral program.

Net worth asset worksheet (\$500,000 limit, not including your home)

Table with 4 rows listing assets (Cash, investments, other investments, and total assets) and their corresponding amounts in a grid format.

If your 2023 total assets on line 4 exceed \$500,000, Stop here. You don't qualify for the Property Tax Deferral Program.

Declaration

I declare under penalties for false swearing that I have examined all documents and to the best of my knowledge, they are true, correct, and complete (ORS 305.990). I understand a lien will be placed on this property and I will be charged lien recording and/or security interest fees. I understand that 6 percent interest accrues on each years' deferred tax amount (ORS 311.666-701). I understand that heirs or other transferees receiving the homestead following my death may be found liable for any unpaid debt accrued under the deferral program.

Table with 4 columns: Applicant's signature, Date, Joint applicant's signature, Date.



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County section (Don't complete. This section will be completed by the county assessor's office.)

Property description (Please choose only one selection as platted or unplatted.)	Platted				
	● LOT _____		BLK _____		Legal description _____
	Unplatted For all unplatted properties attach a copy of the recorded deed or contract.				
	● Parcel in: T _____		R _____		SEC _____
	As described in _____ County Containing _____ acres				
Deed information	Current deed information				
	<input type="checkbox"/> Deed recorded (date) ● _____ Document/instrument number Microfilm number Reel Book/volume Page				
Assessor's certification	Earliest deed showing ownership by the taxpayer(s) ● _____		Recorded (date) _____ Document/instrument number _____		
	<input type="checkbox"/> Check here for split levy code		Assessor's account number _____ Levy code _____		
	Assessor's account number _____		Levy code _____		
	Property described above contains		If the property contains multiple units, what is the percentage of value allocated to the taxpayer's unit (percent to be deferred)? ● _____ %		
	<input type="checkbox"/> A single unit <input type="checkbox"/> Multi-units				
<input type="checkbox"/> Late filing <input type="checkbox"/> Fee paid					
Assessor's (or Assessor's designee's) signature verifying applicant is the owner of record				Date	County number
X					