



Oneida County Assessor's Office

10 W Court St
Malad City, ID 83252
208-766-4116 ext 116
jolsen@oneidaid.us

Homeowner's Exemption Form

Office use only

Received _____

Initials _____

- To qualify for a HOMEOWNER'S EXEMPTION, Idaho Code 63-602G, this property must serve as your primary dwelling and you must be a resident of the State of Idaho.
- Idaho Driver's License required.** (Idaho law passed July 2024, states you have 30 days to acquire an Idaho driver's license)
- Application for new construction must be within 30 days of occupying new construction.**
- It is the responsibility of the taxpayer to ensure the Homeowner's Exemption form is received by the Oneida County Assessor's Office before any required Deadline.**

Parcel #: _____ Owner(s) of Record: _____

Full Legal Name: _____ Date of Birth: _____ DL# _____

Full Legal Name: _____ Date of Birth: _____ DL# _____

Property Address: _____ City _____ State _____ Zip _____

Mailing Address: _____ City _____ State _____ Zip _____

Date property was purchased ____/____/____ Date property was occupied ____/____/____

What was your previous address? _____ County: _____

Did you have the Homeowner Exemption on the previous property? ____ Do you have it on any other property? ____

Pursuant to Idaho Code 63-602G(5)(amended 7/1/2024) upon discovery of evidence indicating the existence of an improperly claimed Homeowner's Exemption, the Assessor must assess a recovery of property taxes, plus costs, late charges and interest. Information collected will be submitted to the Idaho State Tax Commission and the Idaho Secretary of State.

By signing below: I certify to the best of my knowledge and belief, and under penalty of perjury that the information provided herein is true and correct, I certify that I am an Idaho resident, I am the owner of the property described herein, and I occupy the property as my primary dwelling place. **I understand that I am only allowed one Homeowner's Exemption and this application voids any previous Homeowner's Exemption.**

_____/____/____
Owner's Signature Date

_____/____/____
Owner's Signature Date

Phone#/Email: _____

Phone#/Email: _____

For Oneida County Use only: _____
Deputy Assessor's Signature Date

Notes: