



ADA COUNTY CASUALTY LOSS CANCELLATION FORM FOR TAX YEAR _____

**PLEASE HAND-DELIVER, MAIL
OR FAX SIGNED COPY TO**

Ada County
Board of County Commissioners
200 Front St., 3rd Floor, Boise, ID 83702

For more information please contact:
Phone (208) 287-7000 Fax (208) 287-7009
www.adaweb.net/commissioners

Application for exemption from taxation: real and personal property which has been damaged by an event causing loss to all or a portion of the property. The Board of County Commissioners on a case by case basis shall determine whether to cancel in whole or any portion of the taxes. **Attach any documentation necessary to validate loss such as pictures, insurance quotes or bids.**

OWNER INFORMATION

1. Owner's Name _____
2. Owner's Daytime Phone _____
3. Property Address _____
4. Contact Person (if different from above) _____
5. Contact's Daytime Phone _____
6. Mailing Address _____ City _____ State _____ Zip _____

PARCEL #

PROPERTY INFORMATION

Type of property Residence Manufactured Home Multi-family Dwelling
 Commercial Farm

Date of Occurrence: _____
(must be between 4th Monday of June and 12/31)

Description of Occurrence _____

Owners Signature _____ Date _____

STATE OF IDAHO)
COUNTY OF _____)

On this _____ day of _____, in the year of 20____, before me, _____

Personally appeared _____, proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is (are) subscribed to this instrument and acknowledged that he (she) (they) executed the same.

S
E
A
L

Notary Public
My Commission Expires on _____

TO BE COMPLETED BY ASSESSOR'S OFFICE

Property Description _____

Verified by _____ Date _____

Signature of Appraiser _____ Date _____

Date sent to Commissioner's Office _____