

Eddie Cook Maricopa County Assessor

				EXEMPTION DEADLIN	E WAIVER
	PLEASE CH	ECK O	NE EXEMPTION TY	PE:	
☐ Perso	nal (Widowed/Totally	y Disable	ed/Disabled Veterar	n) 🗌 Organizational	
Purpose: The applicat deadline per A.R.S. § 4		n was file	ed on or after March	n 1 and constitutes a wa	niver of the
A COMPLETED APPI			ITTED ALONG WIT SEPTEMBER 1	TH THIS EXEMPTION I	DEADLINE
Date:	Parcel or A	.ccount 1	Number:		
Applicant Name:					
				Zip:	
Phone:	E-Mail:				
Peacon for not filing tin	aelv:				
	completed applicationsit our office's website		•	its to our office (available)	e options):
Email: PE.SVP	@Maricopa.gov	OR	ASR.OE@Marice	opa.gov	
Maricop 301 W J	ff in person: (for Personal) or Ol a County Assessor efferson St , AZ 85003	E (for Or	ganizational)		
I hereby request that th Board of Supervisors p			he tax exemption be	redeemed by the Maric	opa County
Print Name:					
Signature:			Date: _		