

BRIANA JOHNSON, Clark County Assessor APPRAISAL DIVISION

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NON-RESIDENT, ACTIVE DUTY MILITARY PERSONAL PROPERTY TAX EXEMPTION AFFIDAVIT

Requirements to Claim Exemption – A copy of this form together with the applicable property declaration must be filed by July 31st, each fiscal year. (Please type or print)

Part 1 Must be completed by Commander or Authorized Officer

I hereby certify that I have examined the service record of (full legal name of active duty military servicemember)

First		Middle		Last	
Rank		, last four digits of SS#		and find that he or	
she is a legal resident of the State of		and a	a member of	unit	
and is assigned to duty in Ne	evada at				
installation effective	Ordered to Duty Stat	ion .			
I declare under penalty of	perjury that the	foregoing is true and correc	t.		
Printed Name of Commander or Au	thorized Officer		Rank		
Signature (in ink)			Date		
()					
() Telephone Number (Mandatory) Email Add			udress		
Year	Make	Model	Serial Number	Serial Number	
Assessor ID					
Full Legal Name					
First		Middle		Last	
Date of Birth					
Physical Address					
Addr	ess	City	State	Zip-Code	
Mailing Address					
Addr	ess	City	State	Zip-Code	
() Telephone Nun	nber (Mandatory)		Email A	ddress	
		foregoing is true and correc			
Signature (in ink)		Date			