OTC 930
Tax Year 2027
Revised 11-2026

State of Oklahoma

Application for Veterans Exemption Personal Property

Return to County Assessor by March 15

Part I

County: _____ Account Number: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

Mailing Address: (if different from above)

_____

Part II

Who Is Eligible:
The veterans exemption specified in 68 OS Sec. 2887(12), is available to all veterans whether on active duty or honorably discharged, who served in the Armed Forces of the United States during a state of national emergency as declared by the President of the United States or Congress during any past, current or future period. Persons who served exclusively in the National Guard or the Reserves and whose military unit was not activated are not eligible for the exemption. All surviving spouses made so by the death of such enlisted or commissioned personnel, who are bona fide residents of Oklahoma, shall be entitled to the exemption. Provide a copy of your U.S. Military Form DD-214 for verification.

What Is Included:
All tools and implements of every veteran maintaining a home. There is no restriction that the items be located on the homestead site, but must be located in the same county where the exemption application is filed.

Amount of Exemption:
The amount of the exemption is limited to Two-Hundred Dollars ($200.00) in gross assessed value of the eligible items. This may result in actual tax savings of an estimated $15.00 to $25.00 depending which county you reside in.

Period of Service:
Mark the Appropriate Box:

- ☐ **World War II:** December 6, 1941 to December 31, 1946
- ☐ **Korean War:** June 27, 1950 to January 31, 1955
- ☐ **Vietnam:** February 28, 1961 to May 7, 1975
- ☐ **Other** or future period during which a state of national emergency shall have been declared to exist by the Congress or President of the United States (Ref: 68 OS Sec. 2887(12) and 72 OS Sec. 67.13a)

  (If "Other", specify military action and period of service)

  _____

Part III

Under penalty of perjury, I the undersigned, affirm that all information provided and herein contained are true and correct to the best of my knowledge.

Applicant Signature: _____ Date: _____

ASSESSOR USE:

☐ Approved ☐ Denied

School District

Assessor or Deputy Signature: _____ Date: _____