



Application for Property Tax Rebate

Eligibility Guidelines:

- Applicant must be the current owner and occupant of the home
- Age 65 or older, or disabled veteran as defined by K.S.A. 79-4502
- Total household income at or below the Kansas Homestead Refund program income limit or the HUD Very Low Household Income Guidelines for 2025, whichever is higher
*Household income includes 50% of Social Security and SSI Benefits.
 Does not include Social Security Disability or SSI Disability Payments*
- County appraised value of home does not exceed **\$350,000**
- Home cannot be used as a short-term rental

To Apply:

- Between Jan 15, 2026 and April 15, 2026 submit this application and proof of income for all household members to the County Clerk’s Office in person, by mail, or email
 Address: 1100 Massachusetts St., Lawrence, KS 66044
 Email address: PropertyTaxRebate@dgcoks.gov

Required Documents:

- Form 1040 – U.S. Individual Income Tax Return for 2025
- If you are not required to file a Federal Tax Return; Form SSA-1099 – Social Security Benefit Statement for 2025 will be accepted
- Disabled Veterans must submit a current copy of their Veterans Health Identification Card (VHIC) with a “service connected” designation

2026 Property Tax Rebate Program Income Limits

Household Size	Total Household Income
1	\$43,389
2	\$43,389
3	\$46,600
4	\$51,750
5	\$55,900
6	\$60,050
7	\$64,200
8	\$68,350

Total gross income includes, but is not limited to: wages, interest and dividends, Social Security and SSI, railroad retirement, veterans benefits, pensions and annuities, unemployment, alimony, welfare and TAF

COMPLETE THE SECTION BELOW

PROPERTY INFORMATION			
Owner Name			
Address	City	State	Zip
Email Address		Phone Number	
MAILING ADDRESS IF DIFFERENT FROM PHYSICAL ADDRESS			
Address	City	State	Zip
OWNER INFORMATION			
Date of Birth	Disabled Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	# of People in Household	Total Household Income
Is your income based on a disability (Social Security, SSI, or VA)? <input type="checkbox"/> Yes <input type="checkbox"/> No			

By signing below, I certify that all information provided is true and correct to the best of my knowledge.

Signature of Applicant

Date

OFFICE USE ONLY

Quickref:	Appraised Value:
Total Tax: \$	County Portion of Tax: \$
Paid: Y N	Application Eligibility: Eligible Ineligible
Ineligibility Reason:	