



DISABILITY CERTIFICATION

Instructions for Disability Income Tax Credit

- 1. You must have suffered a permanent and complete loss of function of two limbs on or before the close of the tax year for which the credit is claimed.
- 2. This certificate must be completed by your county health officer.
- 3. Claim the credit on section 3 of Schedule OR-ASC using code 804.
- 4. You only need to obtain the certification once. Be sure to keep this form with your permanent records. Upon request, the form shall be provided to the department to verify the credit.

I, _____, the appointed public health officer of _____ county have examined

Applicant's first name and middle initial

Last name

Social Security Number

for the purposes of the Oregon income tax credit for certain disabilities. After examination, I find that the applicant has suffered **PERMANENT** and **COMPLETE** loss of function of:

- Both Arms
- Both Legs
- One Arm and One Leg

Date of Disability _____

Signature _____ Date _____