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Assessors' Use only

Date Received Application No.

Parcel No.

Name of City or Town

SENIOR -- SURVIVING SPOUSE OR MINOR FISCAL YEAR _____ APPLICATION FOR STATUTORY EXEMPTION General Laws Chapter 59 §5

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION (See General Laws Chapter 59 §60)

Return to: Board of Assessors

Must be filed with assessors on or before December 15 or 3 months after actual (**not** preliminary) tax bills are mailed for fiscal year if later.

INSTRUCTIONS: Complete all sections that apply. If you qualify under more than one category, you will receive the exemption that provides the greatest amount of assistance. Please print or type.

A. IDENTIFICATION. Complete this section fully.

Name of Applicant:		Marital Status:
Social Security No	(optional)	Phone Numbe <u>r: ()</u>
Legal Residence (Domicile) on July 1,		Mailing Address (If different)
No. Street City/Town Location of Property:	Zip Code	No. of Dwelling Units: $1 \ 2 \ 3 \ 4 \ $ Other—
Did you own the property on July 1,? Yes If yes, were you: Sole Owner Co-owner with S	No 🗌 Spouse Onl	y 🗌 Co-owner with Others 🗌
Was the property subject to a trust as of July 1, 3	? Yes	No 🗌
If yes, please attach trust instrument including all schedu	ules.	
Have you been granted any exemption in any other city <i>If yes, name of city or town</i>	or town (M	A or other) for this year? Yes No Amount exempted \$

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)

Ownership	GRANTED	Assessed Tax \$	
Occupancy	DENIED	Exempted Tax \$	
Status	DEEMED DENIED	Adjusted Tax \$	
Income			
Assets		Board of Assessors	
Date Voted/Deemed Denied			
Certificate No.			
Date Cert./Notice Sent			
Exemption: Clause		Date:	

FILING THIS FORM DOES NOT STAY THE COLLECTION OF YOUR TAXES

THIS FORM APPROVED BY THE COMMISSIONER OF REVENUE

B. EXEMPTION STATUS. Check each status that applies to you and complete the questions that follow.				
	Deceased Spouse's Name			
	Date of Death			
	Have you remarried? Yes 🗌 No 🗌 <i>If yes, date of remarriage</i>			
MINOR WITH PARENT DECEASED	Deceased Parent's Name			
	Date of Death			
If first year of application, attach a copy of death	certificate.			
Are you a surviving spouse or a minor chi	Id of a firefighter or a police officer killed in the line of duty? Yes \Box No \Box			
IF NO, AND NO C	THER STATUS APPLIES TO YOU, GO ON TO SECTION D			
If yes, and this is the first year of application, provide circumstances of death.				
	GO ON TO SECTION E			
SENIOR 70 OR OLDER (65 or older	by local option- See Assessors) Date of Birth			
	If first year of application, attach copy of birth certificate.			
Have you owned and occupied the proper	ty as your domicile for at least 10 years? Yes 🗌 No 🗌			
If no, list the other properties you owned and/or o	occupied during the past 10 years.			
Address	Dates Owned Occupied			

GO ON TO SECTION C

C. GROSS RECEIPTS FROM ALL SOURCES IN PRECEDING CALENDAR YEAR. Complete this section if you are a senior. Copies of your federal and state income tax returns, and other documentation, may be requested to verify your income.

	Applicant & Spouse	Co-owner(s) & Spouse(s)
Retirement Benefits (Social Security, Railroad, Federal, MA & Political Subdivisions)		
Other Pensions and Retirement Allowances		
Wages, Salaries and other Compensation		
Net Profits from Business, Profession or Property Rental		
Interest and Dividends		
Other Receipts (Capital Gains, Public Assistance, etc.)		
TOTALS		
GO ON TO SECTION D		

D. VALUE OF assets.	ALL PROPERTY OWNED ON JULY 1 THIS YE	AR. Documentation may be requested	d to verify your
Real Estate	Assessed Valuation	Amount Due on Mortgage	Value
Domicile			
Other			
Personal Estate			
	Bank Accounts: Name & Address of Bank	Account No.	
	Stocks, Bonds, Securities, etc.: Description & Amoun	t	
	Stocks, Donas, Securites, etc., Description & Finiour		
	Motor Vehicles & Trailers: Year, Make & Model		
	Other Non-exempt Personal Property: Kind & Descri	iption	
		TOTAL	
	GO ON TO SECTI	ON E	

E. SIGNATURE. Sign here to complete the application.

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, this return and all accompanying documents and statements are true, correct and complete.

Signature	Date
If signed by agent, attach copy of written authorization to sign on behalf of taxpayer.	

TAXPAYER INFORMATION ABOUT PERSONAL EXEMPTIONS

PERSONAL EXEMPTIONS. You may be eligible to reduce all or a portion of the taxes assessed on your domicile if you meet the qualifications for one of the personal exemptions allowed under Massachusetts law. Qualifications vary, but generally relate to age, ownership, residency, disability, income or assets.

You may be eligible for an exemption if you fall into any of these categories:

- Blind
- Veteran with a service-connected disability
- Surviving spouse

- Minor child of deceased parent
- Senior citizen age 70 and older (65 and older by local option)

More detailed information about the qualifications for each exemption may be obtained from your board of assessors.

WHO MAY FILE AN APPLICATION. You may file an application if you meet all qualifications for a personal exemption as of July 1. You may also apply if you are the administrator or executor of a person who qualified for a personal exemption on July 1.

WHEN AND WHERE APPLICATION MUST BE FILED. Your application must be filed with the Board of Assessors by December 15 or 3 months after the actual bills were mailed for the fiscal year, whichever is later. An application is filed when (1) received by the assessors on or before the filing deadline, or (2) mailed by United States mail, first class postage prepaid, to the proper address of the assessors, on or before the filing deadline, as shown by a postmark made by the United States Postal Service. THIS DEADLINE CANNOT BE EXTENDED OR WAIVED BY THE ASSESSORS FOR ANY REASON. IF YOUR APPLICATION IS NOT TIMELY FILED, YOU LOSE ALL RIGHTS TO AN EXEMPTION AND THE ASSESSORS CANNOT BY LAW GRANT YOU ONE.

PAYMENT OF TAX. Filing an application does not stay the collection of your taxes. In some cases, you must pay the tax when due to appeal the assessors' disposition of your application. Failure to pay the tax when due may also subject you to interest charges and collection action. To avoid any loss of rights or additional charges, you should pay the tax as assessed. If an exemption is granted and you have already paid the entire year's tax as exempted, you will receive a refund of any overpayment.

ASSESSORS DISPOSITION. Upon applying for an exemption, you may be required to provide the assessors with further information and supporting documentation to establish your eligibility. The assessors have 3 months from the date your application is filed to act on it unless you agree in writing before that period expires to extend it for a specific time. If the assessors do not act on your application within the original or extended period, it is deemed denied. You will be notified in writing whether an exemption has been granted or denied.

APPEAL. You may appeal the disposition of your application. The disposition notice will provide you with further information about the appeal procedure and deadline.