

**Elderly Exemption Application NH RSA 72:39-a**

Owner #1: \_\_\_\_\_

Owner #1 Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner #2: \_\_\_\_\_

Owner #2 Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Mailing \_\_\_\_\_

Married\_\_\_\_ Widow/Single\_\_\_\_ Divorced\*\_\_\_\_

Address \_\_\_\_\_

\*new applicants: divorce decree must be provided

If currently married, how many years \_\_\_\_\_

Telephone: \_\_\_\_\_

NH resident since \_\_\_\_\_ (year)

Cell phone: \_\_\_\_\_

When did you purchase the property? \_\_\_\_\_ (year)

Property Single Family\_\_\_\_ \*\* Multi Units \_\_\_\_\_

\*\* Single Family with in-law dwelling? \_\_\_\_\_

Is a business operated out of home? Yes\_\_\_\_ No\_\_\_\_

Property Ownership Individually \_\_\_\_\_ % owned \_\_\_\_\_

If yes, entire business IRS filing must be provided.

In a Trust\* \_\_\_\_\_ Life Estate\* \_\_\_\_\_

\*\*Mortgage Principal Amount \_\_\_\_\_

Town Map / Lot \_\_\_\_\_

\*If property is in a Trust or Life Estate the **entire** trust / life estate document must be provided unless previously submitted.

**Gross Income Information : from ALL SOURCES**

**OWNER #1**

**OWNER #2**

1	Social Security	\$	_____	\$	_____
2	Salaries, Wages, Tips or Self Employment	\$	_____	\$	_____
3	Pensions	\$	_____	\$	_____
4	Distributions (IRA, Annuities)	\$	_____	\$	_____
5	Interest Income (all sources)	\$	_____	\$	_____
6	Dividend Income (all sources)	\$	_____	\$	_____
7	Rental Real Estate Income	\$	_____	\$	_____
8	Unemployment Benefits / VA Benefits	\$	_____	\$	_____
9	Business Income	\$	_____	\$	_____
10	Capital gain	\$	_____	\$	_____
11	<b>Any other</b> income or financial support or assistance (alimony/child support, fuel assistance, food stamps, lottery winnings, person/relative living in home etc.)	\$	_____	\$	_____
	<b>TOTAL INCOME</b>	\$	_____	\$	_____
1.	Deduct proceeds from sale of an asset (attach documentation)	-	_____	-	_____
2.	Deduct life insurance received on a death of an insured	-	_____	-	_____
3.	Expenses & costs incurred in the course of conducting a business enterprise	-	_____	-	_____
	<b>TOTAL COMBINED INCOME</b>	\$	<b>=</b>		_____

**The following documentation MUST be submitted with your application**

- Age verification: a copy of your drivers licenses, birth certificate or passport
- Entire Federal IRS filing with 1099's for the year preceding. If you filed your taxes online the copy must include the IRS's confirmation #. If you are mailing your IRS filing provide a photo copy of the actual document being sent to the IRS. You may be asked to sign the IRS 4506T-EZ allowing the town to receive your IRS transcript.
- Year end bank statements - savings and checking (entire statement)
- Year end statements (entire statement) for CD's, IRA's, stocks, bonds, annuities, etc...
- Property tax bill for any *additional* property other than your legal and primary residence in Allenstown, NH
- **All income and asset documentation MUST be provided to verify your eligibility. Without this documentation, your application will not be processed.**

**APPLICANTS ASSETS**

Deadline to file is April 15<sup>th</sup>

*The following applicants information will be verified through all resources available to the Assessor's Office and Town of Allenstown.*

**1. FINANCIAL:**

<b>Checking Acct #</b> (last 4 digits)	Bank Name/ Company/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	
		\$	
		\$	

<b>Savings Acct #</b> (last 4 digits)	Bank Name/ Company/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	
		\$	
		\$	

<b>Credit Union Acct #</b> (last 4 digits)	Bank Name/ Company/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	
		\$	

<b>IRA Acct #</b>	Company Name/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	

<b>CD/Money Market Acct #</b>	Company Name/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	

<b>Annuities Account #</b>	Company Name/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	

<b>Stocks/Bonds Acct #</b>	Company Name/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	

<b>Mutual Funds Acct#</b>	Company Name/Institution	Balance / Value	<u>Notes</u>
		\$	
		\$	
		\$	

<b>Life Ins. Policy Acct #</b>	Company Name/Institution	Balance / Value	<u>Notes</u>
_____		\$	
Whole _____ or Term _____		\$	
_____		\$	
Whole _____ or Term _____		\$	

Use additional sheet if necessary

**2. REAL ESTATE:**

Do you own any other real estate other than your Allenstown residence (individually or jointly) ANYWHERE including homes, land, mobile homes, time share, camps etc... Yes \_\_\_\_\_ No \_\_\_\_\_ (must include copy of tax bill for any other real estate owned)

Location: \_\_\_\_\_ Property Market Value: \$ \_\_\_\_\_  
 (address) (City) (State)

**3. VEHICLES**

VEHICLE INFORMATION		RECREATION/UTILITY (Boats, Motorcycle, RV, Trailers, ATVs, snowmobiles etc...)	
Year Make Model & Mileage	Value	Year Make Model	Value
	\$		\$
Loan Balance \$	Lease / Own	Loan Balance \$	

Year Make Model & Mileage	Value	Year Make Model	Value
	\$		\$
Loan Balance \$	Lease / Own	Loan Balance \$	

**TOTAL OF ALL ASSETS (SECTIONS 1-3) \$ \_\_\_\_\_**

***All financial YEAR END statements MUST be provided. Without this documentation, your eligibility can not be verified and the application will not be processed. All documentation will be considered confidential and treated as such. If you would like the copies returned, provide a self addressed stamped envelope. If a self addressed stamped envelope is not provided your documents will be shredded after processing.***

**Would you like copies mailed back to you? Yes \_\_\_\_\_ No \_\_\_\_\_**

*I swear, under penalty of perjury, that the information provided in this income an asset statement that will be used to determine my eligibility for the property tax exemption, is a correct and accurate account of my/our financial condition. I/We understand that the Assessing Department will verify the information that I/we disclosed through all resources available to the Town of Allenstown and to the Assessing Department.*

\_\_\_\_\_  
Property owner #1 signature

\_\_\_\_\_  
Property owner #2 signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Printed name

**PERMISSION**

The Town of Allenstown will not release or discuss your information with any party without your express written permission. If you would like us to discuss your application with a friend, family member, caregiver or financial advisor please complete the following.

I/We \_\_\_\_\_ give the Town of Allenstown Assessing  
 (Name of property owner(s))  
 Department permission to discuss with \_\_\_\_\_ any financial information  
 (Name of contact)  
 necessary to complete my application for the tax exemption program.

\_\_\_\_\_  
Property owner #1 signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Property owner #2 signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contact Name (Print Name)

\_\_\_\_\_  
Contact person's relationship to applicant(s):

(\_\_\_\_\_) \_\_\_\_\_  
Contact Telephone #

### **Income Limits**

Single, widow, divorced - \$40,000 (Net income)

Married / civil union - \$52,000 (Net income)

### **Asset Limit**

Assets can not exceed \$85,000 – not including your primary and legal residence in Allenstown NH.

If your residence is a 2 or more family residence, the multi-unit portion of the property is considered an asset.

### **Exemption Amount**

Applicants meeting all state statutory requirements will be eligible for the following assessment reduction

65 – 74 years of age	\$40,000 assessment reduction
75 – 79 years of age	\$60,000 assessment reduction
80 years and older	\$80,000 assessment reduction

### **Qualifications**

- Must be 65 years of age on or before April 1<sup>st</sup>.
- Must be the owner of record on or before April 1<sup>st</sup>
- Must reside in the State of New Hampshire for 3 consecutive years on or before April 1<sup>st</sup>
- Married couples/civil unions must be married for 5 consecutive years on or before April 1<sup>st</sup>
- The residential property for which the property tax exemption is sought must be occupied as their principal place of abode.

### **Required Documentation**

The following documents will be required to verify your eligibility, including but not limited to:

- Age verification: a copy of your drivers licenses, birth certificate or passport
- Entire federal income tax filing with *all* 1099'S for the year preceding
- Rollover documentation with 1099's
- Complete year end statements for all bank accounts
- Complete year end statements for CD's, IRA's, 401K, stocks and/or bonds, money markets, etc
- Life Insurance certificate: indicated whole or term policy and statement of value
- Social Security 1099's
- Statement of VA benefits
- Trust document : entire document if not previously provided

### **Important**

- Failure to apply by April 15<sup>th</sup> will result in the removal/denial of the property tax exemption
- Failure or refusal to provide income and asset documentation for verification will result in the removal/denial of the property tax exemption
- Should you no longer qualify due to income or asset changes you are obligated to advise the Assessing Department at 424-5136
- Should you no longer qualify due to a change in your permanent residency, you are obligated to advise the Assessing Department at 424-5136.
- If applicant or spouse is receiving a property tax exemption, tax credit or homestead exemption in another town, city or state, applicant and or spouse is not eligible for a property tax exemption in Allenstown.