47 Washburn Rd., Alexandria, NH 03222 744-3220(P) 744-9461(F) alexandrianh@metrocast.net

RE:	Elderly Exemption
Dea	r Taxpayer:
	letter is to notify you of the items we need in order to qualify your application for an erly Exemption. Please bring the following information to our office:
	Completed PA-29 Permanent Application for Property Tax Credit/Exemptions  List of assets, value of each asset, net encumbrance and net value of each asset. (excluding the value of the actual residence in accordance with RSA 72:39-a(c)).
	☐ Statement of applicant and spouse's income.
Ε	Federal Income Tax Form, if filed or IRS Form 8821.
	□ State Interest and Dividends Tax Form.
	SSA-1099 Statement (Social Security Benefit Statement)
	□ Property Tax Inventory Form filed in any <i>other</i> town.
	☐ Birth Certificate or Driver's License to verify proof of age.
	∃ 3 Months of Bank Statements (Checking and Savings)

A qualification worksheet has been included to assist you in making sure all documents are in place to ensure the continuance of your exemption application. We will be glad to make copies of any documents for you. All documents are considered confidential and will be returned to you after a decision is reached on the exemption.

The application must be filed by April 15th preceding the setting of the tax rate.

If you need help in filling out this form, please bring it to our office and we will be able to assist you.

Sincerely,

Jennifer Dostie Administrative Assistant Selectmen's Office

# ELDERLY TAX EXEMPTION QUALIFICATIONS WORKSHEET (MAY BE USED FOR REQUALIFICATIONS. MAY ALSO BE USED FOR BLIND, DEAF OR

DISABLED EXEMPTIONS WITH 3 YEAR NH RESIDENCY REQUIREMENT)

RSA 72:33, VI allows Selectmen or Assessing Officials to require those receiving tax exemptions or credits to re-file their qualifying information periodically but no more frequently than annually. Failure to file such periodic statements may, at the discretion of the Assessing Officials, result in a loss of the exemption or tax credit for that year.

Town Name: Alexandria

Town Address: 47 Washburn Road, Alexandria, NH 03222

This worksheet is to be completed and submitted along with completed Form PA-29, Permanent Application for Property Tax Credit/Exemptions. All information supplied will be treated confidentially and any supporting documents will be returned upon approval or denial of the application. Please note the following **Income and Asset Limits** when considering submission of your application:

INCOME LIMITS: Single [\$20,500] Married [\$30,000]

ASSET LIMIT: Single [\$64,000] Married [64,000]

If you hold a life estate in the property or your property is owned by a trust, you must also submit a completed form PA33 (Statement of Qualification) <u>and</u> submit a copy of the deed showing the assigned ownership of the life estate <u>or</u> a copy of the Declaration of Trust, including a list of beneficiaries <u>or</u> a completed Certification of Trust per RSA 564-B: 10-1013.

Please print all information clearly:	
Applicant's Name:	
Spouse's Name:	
Property Address:	
Mailing Address:	
Date of NH Residency	
(Three-year NH residency for elderly exemption, Five-year NH residency for	all other exemptions.)

## **INCOME:**

Please list the source and amount of all income for year for both you and your spouse	Please	list the	source a	ınd ame	ount of	all	income	for	vear for	r both	vou and	vour si	nouse.
---------------------------------------------------------------------------------------	--------	----------	----------	---------	---------	-----	--------	-----	----------	--------	---------	---------	--------

SOURCE:	(Net income)	Applicant:	Applicant's Spouse:	Supporting Documentation
Social Securit	y:	\$	\$	
Pension & Re	tirement	\$		
Wages:		\$	\$	and the second s
Rental Income	ə:	\$	\$	
Other Income	/Annuities:	\$		-
Interest Incom	ne:	\$	\$	
TOTAL INC	ОМЕ:	\$	\$	
1. 2. 3. Check Return	Federal Incom Any other doc here if the appl	uments as needed to		file a Federal Income Tax
ASSETS:				
			'D's, Stocks & Bonds, IRA	's, Annuities, Travel Trailers,
INSTITUTION NAME:		TYPE:	VALUE/	'AMOUNT
		Checking _		
		Savings _		
		Savings _		
		IRA _		
		Other		

<u>VEH</u>	<u>ICLES:</u>					
A.	Make / Model / Year / Mileage					
		Est. Value \$				
В.	Make / Model / Year / Mileage					
		Est. Value \$				
C.	Boat / Model / Year	Est. Value \$				
D.	RV / Model / Year	Est. Value \$				
E.	Other / Description	Est. Value \$				
F.	Other / Description	Est. Value \$				
REA	<u>L ESTATE:</u> (not including your prima	ry residence and up to the greater of 2 acres or the				
minii	num single family residential lot size sp	pecified in the local zoning ordinance.)				
	erty Type	In Town/State				
**Pro	ovide copy of property tax bill.					
		Est. Value \$				
		TOTAL Of All ASSETS \$				
condi inforr	tion to the best of my knowledge. I furtl	above is a correct and accurate accounting of my financial her authorize any agency or financial institution to release is to any agent of the Town of Alexandria. I release all ag from the release of this information.				
APPL	ICANT'S SIGNATURE:	DATE:				
PRIN	TED NAME:					
SPOU	JSE'S SIGNATURE:	DATE:				
PRIN	TED NAME:					
TELE	PHONE NUMBER:					

THIS QUESTIONAIRE WILL BE KEPT CONFIDENTIAL EXCEPT THAT THE COMMSSIONER OF THE DEPARTMENT OF REVENUE ADMINISTRATION OR HIS DESIGNEE SHALL HAVE ACCESS TO IT DURING THE DEPARTMENT'S FIVE YEAR ASSESSMENT REVIEW OF ASSESSING PRACTICES (RSA 21-J:11-a).

#### FORM PA-29

#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

### PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS

DUE DATE APRIL 15th PRECEDING THE SETTING OF THE TAX RATE CALL YOUR CITY/TOWN FOR INCOME AND ASSET LIMITS

There is a separate page of instructions (pages 3 & 4) that accompany this form. If you do not receive the instructions, please visit our web site at <a href="https://www.nh.gov/revenue">www.nh.gov/revenue</a> or contact your city/town.

STEP 1	PROPERTY OWNER'S LAST NAME	FIR	ST NAME	INITIAL INITIAL  ZIP CODE  ZIP CODE  LOT #							
NAME AND ADDRESS	PROPERTY OWNER'S LAST NAME	FIR	ST NAME	INITIAL							
	MAILING ADDRESS			CVXX							
	СІТУ/ТОЖН		STATE	ZIP CODE							
	CITY/TOWN TAX MAP #	BL	OCK#	LOT#							
	ADDRESS OF PROPERTY										
STEP 2	1 Veteran's Name										
VETERANS'											
TAX CRED- ITS/EX-	2 Date of Entry into Military Service		Date of Discharge/Release in	ont whitery dervice							
EMPTION	4 Veteran	Veterans' Tax Credit	nnected Total and Permanent	Disability							
	Spouse Surviving Spouse		Spouse of Veteran Who Was K								
	Veteran of Allied Country	Ordan tor Barring C									
	5 Name of Allied Country Served in _		6 Branch of Service	e							
	7 US Citizen at time of entry into	the Service 8	Alien but Resident of N	H at time of entry into the Service							
	9 Does any other eligible Veteran ow	n interest in this property	/? No Yes If YES,	illed or Died on Active Duty  ie  H at time of entry into the Service  give name							
	10 Total Veteran Exemption (a) Veteran (b) Surviving Spouse of that Veteran										
STEP 3 OTHER	Elderly Exemption Applicant's Date of Birth Spouse's Date of Birth Must be 65 years of age on or before April 1st of year for which exemption is claimed.										
EXEMP-	12 Disabled Exemption	before April 13t of your	Solar Energy Syste								
TIONS	Blind Exemption Woodheating Energy Systems Exemption										
	Deaf Exemption Wind-Powered Energy Systems Exemption										
STEP 4 IMPROVE- MENTS	13 Improvements to Assist Persor	ns with Disabilities	Improvements to As								
STEP 5 RESIDEN-	This is my primary residence  NH Resident for one year preceding April 1st in the year in which the tax credit is claimed (Veterans' Credit)  NH Resident for Five Consecutive Years preceding April 1st in the year the exemption is claimed (Disabled & Deaf Exemptions)  NH Resident for Three Consecutive Years preceding April 1st in the year the exemption is claimed (Elderly Exemption)										
CY CY	NH Resident for one year preceding April 1st in the year in which the tax credit is claimed (Veterans' Credit)  NH Resident for Five Consecutive Years preceding April 1st in the year the exemption is claimed (Disabled & Deaf Exemptions)										
	NH Resident for Three Consecutive Years preceding April 1st in the year the exemption is claimed (Elderly Exemption)										
STEP 6 OWNER-	15 Do you own 100% interest in this re	sidence? Yes	No If <b>NO</b> , what perc	ent (%) do you own?							
SHIP STEP 7	7 Under penalties of perjury, I hereby declare that the above statements are true.										
SIGNA- TURES				DATE							
101120	SIGNATURE (IN INV.) OF PROPERTY OWNER										
	SIGNATURE (IN INK) OF PROPERTY OWNER  DATE  DATE										
WHEN TO	Deadline: Form PA-29 must be filed by April 15th preceding the setting of the tax rate. The assessing officials shall send written notice to the taxpayer of their decision by July 1st prior to the date of notice of tax. Failure of the assessing officials to respond shall constitute										
FILE	a denial of the application. Example: If you are applying for an exemption and/or credit off your 2011 property taxes, which are due no earlier then December 1, 2011, then you have until April 15th, 2011 to file this form. The assessing officials have until July 1st, to send notice of their decision. Failure of the assessing officials to respond shall constitute a denial of the application.										
	A late response or a failure to respond by assessing officials does not extend the appeal period.										
	by an overnight delivery service.			stmarked by the post office, or receipted							
APPEAL PROCE- DURE	September 1st following the date of no to the Superior Court. Example: If you to appeal	tice of tax under RSA 72 were denied an exemp	2:1-d to the New Hampshire B tion from your 2010 property to	icant may appeal in writing on or before pard of Tax and Land Appeals (BTLA) or axes, you have until September 1, 2011,							
	Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301, their web site at <a href="https://www.nh.gov/btla">www.nh.gov/btla</a> or by calling (603) 271-2578. Be sure to specify <b>EXEMPTION APPEAL</b> .										

FORM PA-29

#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

# PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS TO BE COMPLETED BY CITY/TOWN ASSESSING OFFICIALS

#### **MUNICIPAL AUTHORIZATION**

		VETERANS' TAX	CREDIT				
CITY/TOWN TAX	MAP#	BLOCK#		LOT#	Grante	d <u>Denied</u>	<u>Date</u>
Veterans' Tax Credit (\$50 minimum to \$500)  Amount \$							
Service Con	nected Total & Permanent Disabilit	y (\$700 minimum to \$2000	) Amount	\$			
1 I	ouse of Veteran Who Was o Died on Active Duty (\$700 minim			\$			
Killed or Who	o Died on Active Duty (\$700 minim harge Papers (Form DD214), Forn	um to \$2000)					
1	nation						
		VETERANS' EXE	EMPTION		Grante	d <u>Denied</u>	Date
Total Exem	ption (a) Vetera			Surviving Spouse			Date
	APPLICABLE ELDERLY AN		Ll ` '	<u> </u>	LIMITS	L	
Income Limits	Disabled Exemption	Elderly Exemption		Elderly Exem		e Category	
Single	\$	\$		65 - 74 years of age	\$		
Married	\$	\$		75 - 79 years of age	\$		
Asset Limits				80 + years of age	\$	• • • • • • • • • • • • • • • • • • • •	
Single	\$	\$			I		
Married	\$	\$					
		OTHER EXE	MPTIONS		<u>Grante</u>	ed <u>Denied</u>	<u>Date</u>
Elderly Exe	mption						
Disabled Ex	'		Amount \$				
	nts to Assist the Deaf						
L  *	nts to Assist Persons with Disabiliti	es	Amount \$		-  -	.	
Blind Exem  Deaf Exem	•					-	
	gy Systems Exemption						
	ng Energy Systems Exemption						
Wind-Powe	Wind-Powered Energy Systems Exemption Amount \$						
A photocopy	of this Form (Pages 1 & :	2) or a Form PA-35 n	nust be r	eturned to the prop	erty owne	er after a	proval
or denial bet	• • •	•					-
The following documentation may be requested at the time of application in accordance with RSA 72:34, II:							
List of asse	ts, value of each asset, net encum	brance and net value of ea	ach asset.				
* Stateme	ent of applicant and spouse's incon	ie.					
<del>  </del>	* Federal Income Tax Form.						
* State Interest and Dividends Tax Form.							
* Property Tax Inventory Form filed in any other town.							
* Documents are considered confidential and are returned to the applicant at the time a decision is made on the application.							
Municipal Notes							
***************************************	I I I I I I I I I I I I I I I I I I I						
Selectmen/Asse	ssor(s) Printed Name	Signatures(s) of App	proval (in in	k)		Dat	e
		I					

FORM
PA-29
Instructions

#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

#### PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS

#### **GENERAL INSTRUCTIONS**

			GENERAL INSTRUCTIONS				
WHERE TO	File with your city/town of primary residency by April 15th preceding the setting of the tax rate.						
WHO MAY FILE	certain exemp April 1st, in the ceding April 1s	Applicant must be qualified as of April 1st of the year the exemption and/or tax credit is claimed. Financial qualifications required for certain exemptions must be met by the time of application. An applicant must have resided in this state for at least one year preceding April 1st, in the year in which the veterans' tax credit is claimed. An applicant must have resided in this state for a least three years preceding April 1st in the year for which the elderly exemption is claimed and five years in which the deaf or disabled exemption is claimed. The terms owner, own or owned, shall include those persons who hold equitable title or the beneficial interest for life in the property.					
CREDITS	Tax <b>credits</b> ap	proved will be deducted from t	heir property tax amount.				
EXEMP- TIONS	-		the amount of the property owner's total assessed value prior to the calculation of tax due.				
ELDERLY EXEMP- TIONS RSA 72:39-a RSA 72:33-b	Applicant must have resided in this state for at least 3 consecutive years preceding April 1st in the year which the exemption is claimed. Property must be: owned by a resident; or owned by a resident jointly or in common with the resident's spouse, either of whom meets the age requirement for the exemption claimed; or owned by a resident jointly or in common with a person not the resident's spouse, if the resident meets the applicable age requirement for the exemption claimed; or owned by a resident, or the resident's spouse, either of whom meets the age requirement for the exemption claimed, and when they have been married for at least 5 years.  Property cannot have been transferred to the applicant, from a person under the age of 65, and related to the applicant by blood or marriage, within the preceding five years.  Property must meet the definition of residential real estate, per RSA 79:39-a(c), which includes the housing unit, which is the person's principal home and related structures such as a detached garage or woodshed. It does not include attached dwelling units and unattached structures used or intended for commercial or other non-residential purposes. If fractional interest is owned, see RSA 72:41, Proration.						
ELDERLY, DEAF & DISABLED FINANCIAL	INCOME LIMITATION	Includes Income from any source including Social Security or pension.	Excludes Life insurance paid on the death of an insured; Expenses and costs incurred in the course of conducting a business enterprise; Proceeds from the sale of assets.				
QUALIFICA- TIONS RSA 72:39-a RSA 72:38-b RSA 72:37-b	ASSET LIMI- TATION	Includes The value of all assets, tangible and intangible.	Excludes The value of the person's actual residence and the land upon which it is located up to the greater of 2 acres or the minimum single family residential lot size specified in the local zoning ordinance. The value of any good faith encumbrances.				
ADA COMPLIANT	enue Adminis	no need auxiliary aids for effect stration are invited to make thei Relay NH 1-800-735-2964.	live communications in programs and services of the New Hampshire Department of Rev- r needs and preferences known. Individuals with hearing or speech impairments may call				
			INE-BY-LINE INSTRUCTIONS				
STEP 1 NAME & ADDRESS		the property owner(s) name ar ation) address for which the cre	nd address in the spaces provided. Also, enter the Tax Map, Block, Lot numbers and the edit or exemption applies.				
STEP 2 VETERAN'S TAX CRED- IT/ EXEMP- TION	Line 1 Enter the Name of the Veteran.  Line 2 Enter the date of entry into military service.  Line 3 Enter the date of discharge or release from military service.  Line 4 Check the box or boxes that apply to indicate whether you are a veteran, veteran's spouse or surviving spouse of a veteran and what type of credit(s) you are applying for.  Line 5 Enter the name of the Allied Country in which you served, if applicable.  Line 6 Enter the Branch of Service that you served in.  Line 7 Check the box if you were a US citizen at the time of entry into the service.  Line 8 Check the box if you were an alien but a resident of NH at the time of entry into the service.  Line 9 Check the appropriate box to indicate if another veteran owns an interest in this property. If yes, provide name.  Line 10 Check the appropriate box(es) to indicate whether you are applying for a total veteran's exemption.						
STEP 3 OTHER EXEMP- TIONS STEP 4	Line 11 If an elderly exemption is requested, check that box and enter the applicant's date of birth. And if appropriate, enter the spouse's date of birth.  Line 12 Check the appropriate box or boxes to indicate the exemption(s) you are applying for.						
IMPROVE- MENTS	Line 13 Check the box if your property has improvements to assist persons with disabilities or to assist the deaf.						
STEP 5 RESIDENCY	NOTE: The se applicant is a	urviving spouse tax credit unde resident.	e that you meet the minimum resident time requirements listed. or 72:28 III and 72:29-a may be applied on any property in the same municipality where the				
STEP 6 OWNERSHIP			or not you own 100% of the property. If no, give the percentage that you do own.				
STEP 7 SIGNA- TURES	All property o	wners must sign in ink. Attach	additional pages with owners signatures if there are more than two owners of record.				

RSA 72:69
WIND-POWERED

RSA 72:65

**ENERGY SYSTEMS** 

#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

#### PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS

Web site for the Veterans' qualifying medals and discharge papers: www.nh.gov/revenue munc\_prop/propertyappraisal.htm then click on either Veterans Medals List or Veterans Qualifying Discharge Papers.

		, , , , , , , , , , , , , , , , , , ,
TYPE OF CREDIT OR EXEMPTION	AMOUNT	WHO MAY APPLY
STANDARD TAX CREDIT RSA 72:28	\$50 (\$51-\$500 if RSA 72:28-a is adopted) is subtracted from the taxes due on the applicant's RESIDENTIAL property occupied as veteran's principle place of abode. For Veteran's surviving spouse: See RSA 72:28 II. For Proration: See RSA 72:30.	Every resident in the U.S. who served not less than 90 days in the armed forces in any of the qualifying wars or armed conflicts, as listed in RSA 72:28, and was honorably discharged; or the spouse or surviving spouse of such resident.  'Under Honorable Conditions' does not qualify.
SURVIVING SPOUSE TAX CREDIT RSA 72:29-a	\$700 (\$701-\$2000 if RSA 72:29-b is adopted) is subtracted from taxes due on the applicant's property, whether residential or not.	The surviving spouse of any person who was killed or died while on active duty in the armed forces, as listed in RSA 72:28, so long as the surviving spouse remains single.
SERVICE- CONNECTED TOTAL DISABILITY TAX CREDIT RSA 72:35	\$700 (\$701-\$2000 if RSA 72:35-a is adopted) is subtracted from the property taxes due on the applicant's residential property.	Any person who:         has been honorably discharged and who has a total and permanent service-connected disability; OR         is a double amputee or paraplegic because of the service-connected injury; OR         is the surviving spouse of above qualified veteran and remains single.
EXEMPTION FOR CERTAIN DIS- ABLED SERVICE- MEN	"shall be exempt from all taxation on said homestead"	Any person, who:     is discharged from the military services of the U.S. under conditions other than dishonorable, or an officer who is honorably separated from military service; AND
RSA 72:36-a		is totally and permanently disabled from service connection and satisfactory proof of such service connection is furnished to the assessors; AND
		is a double amputee of the upper or lower extremities or any combination thereof, paraplegic, or has blindness of both eyes with visual acuity of 5/200 or less as the result of service connection; AND
		<ul> <li>owns a specially adapted homestead which has been acquired with the assistance of the Veterans Administration or owns a specially adapted homestead which has been acquired using proceeds from the sale of any previous homestead which was acquired with the assistance of the Veterans Administration.</li> </ul>
	INTO OVERTICATO A COLOT DED	
EXEMPTION	AMOUNT OF EXEMPTION	SONS WITH DISABILITIES AND THE DEAF WHO MAY APPLY
IMPROVEMENTS TO ASSIST PERSONS WITH DISABILITIES RSA 72:37-a and RSA 72:38-b	The value of improvements made for the purpose of assisting a person with a disability or deafness is deducted from the assessed value of the residential real estate.	Any person owning residential real estate upon which he resides and to which he has made improvements for the purpose of assisting a person with a disability or deafness who also resides on such real estate.
THE OPTIONAL E	XEMPTIONS BELOW MUST BE ADD	PPTED BY THE MUNICIPALITY BEFORE ANYONE MAY APPLY
EXEMPTION	AMOUNT OF EXEMPTION	WHO MAY APPLY
<b>DISABLED</b> RSA 72:37-b RSA 72:37-c	Amount of the exemption, and the level of income and assets (excluding the value of the property owner's residence) are determined by vote of the city/town, per RSA 72:37-c.	Any person eligible under the Federal Social Security Act for benefits to the disabled, and who has been a New Hampshire resident at least 5 years by April 1st of the year the exemption is claimed.
		NOTE: See Financial Qualifications on page 3.
RSA 72:37	\$15,000 (unless the city/town votes an increase) is subtracted from the assessed valuation.	Every inhabitant owning residential real estate, who is legally blind, as determined by the administrator of blind services of the vocational rehabilitation division of the education department.
DEAF EXEMPTION RSA 72:38-b	\$15,000 (unless the city/town votes an increase) is subtracted from the assessed valuation.	NH Residents who are deaf or severely hearing impaired and have been a NH resident for more than 5 consecutive years and meet the income and asset requirements.
SOLAR ENERGY SYSTEMS RSA 72:61	Determined by vote of the city/town, per RSA 72:63.	Any person owning real property equipped with a solar energy heating or cooling system, as defined in RSA 72:61.
WOODHEATING EN- ERGY SYSTEMS RSA 72:69	Determined by vote of the city/town, per RSA 72:71.	Any person owning real property equipped with a woodheating energy system, as defined by RSA 72:69.

Any person owning real property equipped with a wind-powered energy system, as defined by RSA 72:65.

Determined by vote of the city/town, per

RSA 72:67.