



Application for Elderly, Disabled & Deaf Exemption Bristol, New Hampshire

INCOME VERIFICATION FOR ELDERLY, DISABLED & DEAF EXEMPTIONS

The assessing officials for the Town of Bristol are requesting that you complete the following questionnaire that pertains to your elderly, disabled & deaf exemption. Pursuant to RSA 72:34, the assessing officials may request the following information at the time of the application, or, pursuant to RSA 72:33, VI, the assessing officials may request the information annually for existing exemptions.

Failure to provide the requested information may result in denial of the application and failure to file the requested periodic statement may result in a loss of the exemption for that tax year.

RSA 72:34 – Investigation of Application and Decision by Town Officials:

- I. On Receipt of an application provided for in RSA 72:33, the selectman or assessors shall examine it as to the right to the tax exemption, tax deferral or tax credit, the ownership of the property listed, and, if necessary, the encumbrances reported.
- II. For those exemptions having income or asset limitations, the assessing officials may request true copies of any of the following, as needed to verify eligibility. Any documents submitted shall be considered confidential, handled so as to protect the privacy of the applicant, and returned to the applicant at the time a decision is made on the application. The documents are:
 - i. Federal income tax form
 - ii. State interest and dividends tax form
 - iii. Property tax inventory form filed in any other town
 - iv. List of assets, value of each asset, net encumbrance and net value of each asset.
Statement of applicant and spouse's income. (THIS INCLUDES VEHICLES, REAL ESTATE, TRUST FUNDS, INSURANCE POLICIES, RETIREMENT ACCOUNTS AND BANK ACCOUNT INFORMATION)
 - v. Last 3 months of bank statements

RSA 359-C shall not apply to the documents requested for verification under this section.

- I. The assessing officials shall grant the exemption, deferral, or tax credit if:
 - a. They are satisfied that the applicant has not willfully made any false statement in the application for the purpose of obtaining the exemption, referral, or tax credit; and
 - b. The applicant cooperated with their requests under paragraph II, if applies.
 - c.

WHEN TO FILE

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 a denial of the application. Example: If you are applying for an exemption and/or credit off your 2005 property taxes, which are due no earlier than December 1, 2005, then you have until April 15th, 2005 to file this form. The assessing officials have until July 1st, 2005 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.

Date of filing is when the completed application form is either hand delivered to the city/town, postmarked by the post office, or receipted by an overnight delivery service.

APPEAL PROCEDURE

If an application for a property tax exemption or tax credit is denied by the town/city, an applicant may appeal in writing on or before **September 1st** *following* the date of notice of tax under RSA 72:1-d to the New Hampshire Board of Tax and Land Appeals (BTLA) or to the Superior Court. Example: If you were denied an exemption from your 2005 property taxes, you have until September 1, 2006, to appeal.

Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301, their web site at www.nh.gov/btla or by calling (603) 271-2578. Be sure to specify **EXEMPTION APPEAL**.

INCOME VERIFICATION FOR ELDERLY, DISABLED & DEAF EXEMPTION

PLEASE PROVIDE THE FOLLOWING INFORMATION:

- 1. Applicant's Name: _____
- 2. Property Address: _____
- 3. Mailing Address: _____
- 4. Telephone Number: _____
- 5. Map/Lot Of Parcel _____ Number Of Acres: _____
- 6. Applicant's Date Of Birth: ____/____/____ Spouse's Date of Birth: ____/____/____
- 7. Name Of Spouse: _____
- 8. Applicant has been a legal resident of New Hampshire since: _____
- 9. Residence Owned: Solely_____ With Spouse_____ Trust_____ Other_____

ANNUAL INCOME INFORMATION

	SELF	SPOUSE
10. Gross Wages:	_____	_____
11. Social Security:	_____	_____
12. Pension/Retirement	_____	_____
13. All Interest / Dividends	_____	_____
14. Rental Income	_____	_____
15. Other:	_____	_____
16. Total Annual Income:	_____	_____

17. Do you receive social security disability benefits? Yes _____ No _____

18. (If yes, please provide a copy of letter of notification of benefits)

19. Do you currently receive welfare assistance? Yes _____ No _____

ASSET INFORMATION

	SELF	SPOUSE
20. Value in Savings Accounts:	_____	_____
21. Value in Checking Accounts:	_____	_____
22. Stocks, Bonds, Mutual Funds, Ira:	_____	_____
23. C.D.'s or Money Market:	_____	_____
24. Personal Property:	_____	_____

(Estimate value of furniture, antiques, jewelry, cars, trucks, trailers, tractors, R.V., boats, furs, ect.)

ASSET INFORMATION CONTINUED

25. VALUE OF REAL ESTATE OWNED:

Primary Residence: _____

ALL OTHER REAL ESTATE OWNED IN NEW HAMPSHIRE:

Town: _____ Assessed Value: _____

Town: _____ Assessed Value: _____

Town: _____ Assessed Value: _____

Town: _____ Assessed Value: _____

Town: _____ Assessed Value: _____

ALL OTHER REAL ESTATE OWNED IN USA OR COUNTRY:

Town: _____ State: _____ Country: _____

Town: _____ State: _____ Country: _____

Town: _____ State: _____ Country: _____

Town: _____ State: _____ Country: _____



I Do Herby Certify That the above Information Is True and a Correct Statement of My and My Spouse's Financial Condition to the Best of My Knowledge.

Signature Of Applicant _____ Date _____