

Date Received
Application No.
Parcel Id.

HOLDEN

BLIND

Fiscal Year 20__ APPLICATION FOR STATUTORY EXEMPTION

General Laws Chapter 59, Section 5

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

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

INSTRUCTIONS. Complete the following. Please print or type.

A. IDENTIFICATION	
Name of Applicant: _____	Marital Status _____
Phone Number: (____) _____	
Legal Residence (Domicile) on July 1, 20__ _____	
Mailing Address (If different): _____	
Location of Property: _____	No. of Dwelling Units <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 other__
Did you own the property on July 1, 20__? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, were you: <input type="checkbox"/> Sole Owner <input type="checkbox"/> Co-Owner with Spouse Only <input type="checkbox"/> Co-Owner with Others?	
Was the property subject to a trust as of July 1, 20__? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, attach trust document including all schedules.	
Have you been granted any exemption in any other city or town (MA or other) for this year? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, name of city or town _____	Amount exempted \$ _____

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)			
<input type="checkbox"/> Ownership	<input type="checkbox"/> GRANTED	Assessed Tax	\$ _____
<input type="checkbox"/> Occupancy	<input type="checkbox"/> DENIED	Exempted Tax	\$ _____
<input type="checkbox"/> Status	<input type="checkbox"/> DEEMED DENIED	Adjusted Tax	\$ _____
<input type="checkbox"/> Income			
<input type="checkbox"/> 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.

B. EXEMPTION STATUS. Complete the questions that follow.

Were you legally blind as of July 1, 20__? Yes No

Are you registered with the Mass. Commission for the Blind? Yes No

If yes, give Certificate Number _____ Date registered _____ Attach a copy of certificate.
If no, attach a letter from your doctor indicating status as of July first.

C. 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, it 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 to the Appellate Tax Board, or if applicable, the County Commissioners. The appeal must be filed within 3 months of the date the assessors acted on your application, or the date your application was deemed denied, whichever is applicable. The disposition notice will provide you with further information about the appeal procedure and deadline.