ELDERLY EXEMPTION Town of Waterville Valley, NH

Application Criteria

- I. Applicant must be 65 years old as of April 1st of the tax year applying. (Married couples, the eldest should apply)
- II. Applicant must have resided in the state of New Hampshire for at least three years prior to year of application.
- III. Applicant must own real estate individually, own jointly or in common with another or be married to an individual for at least five years who owns real estate within the community.
- IV. Property must meet the definition of a residential real estate, per RSA 79:39-a (c), which includes the housing unit, which is the person's principal home and related structures. It does not include attached dwelling units and unattached structures used or intended for commercial or other non-residential purposes.
- V. 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 past five years.

Financial Qualifications

Income Limitations:

Includes income from any source including Social Security or pension but
excludes a) Life insurance paid on the death of an insured, b) Expenses and
costs incurred in the course of conducting a business enterprises, c) Proceeds
from the sale of assets. The income restrictions adopted by the community
of <u>Waterville Valley</u> is as follows:
(Town/City)

A. Single \$13,400.00

B Married \$20,400.00

Asset Limitations:

To include all net assets excluding the value of the applicant's actual residence and the land upon which it is located up to two acres, or the minimum family lot size specified by local zoning. The asset restriction adopted by the community of Waterville Valley is:

(Town/City)

\$ 35,000.00

Documents required for new applicants.

- 1. Proof of birth
- 2. SSA 1099 Statement (Social Security Benefit Statement)
- 3. Previous years income tax form if not filing a federal income tax form, the following forms will be required if applicable: Form 1099 R Distribution of pensions, annuities …, any W2 wage statements and 1099 interest statements.
- 4. Bank statements and verification of assets listed.

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					
Town Address:					
Application for Property 7	Tax Credit/Exempti nents will be return	ons. All infoned upon app	ormation supplied voroval or denial of	d Form PA-29, Permanent will be treated confidentially the application. Please note or application:	
INCOME LIMITS	: Single [\$	J	Married [\$	1	
ASSET LIMIT:	Single [\$		Married [\$		
completed form PA33 (Sta	atement of Qualific te or a copy of the	ation) and so Declaration	ubmit a copy of the of Trust, including	ust, you must also submit a e deed showing the assigned g a list of beneficiaries or a	
Please print all information	n clearly:				
Applicant's Name:					
Spouse's Name:				_	
Property Address:					
Mailing Address:					
Date of NH Residency				*	
(Three-year NH residency				all other exemptions.)	

Please list the source and am	ount of all income for	year for both you and y	our spouse.
SOURCE: (Net income)	Applicant:	Applicant's Spouse:	Supporting Documentation
Social Security:	\$	\$	3
Pension & Retirement	\$	\$	
Wages:	\$	\$	
Rental Income:	\$	\$	
Other Income/Annuities:	\$	\$	
Interest Income:	\$	\$	
TOTAL INCOME:	\$	\$	
2. Federal Incom3. Any other doc	ividend tax return to the Tax Form uments as needed to v	ne State of NH erify eligibility	o file a Federal Income Tax
ASSETS:			
Please list all assets owned (S Savings Accounts or Investme Boats, Antiques, Cars etc.)		's, Stocks & Bonds, IRA	A's, Annuities, Travel Trailers,
INSTITUTION NAME:	TYPE:	VALUI	E/AMOUNT
	Checking		
	Savings		
	Savings		·
	IRA	······································	
	Other		

INCOME:

eldqualwkst

Elderly Exemption Worksheet Page 2 of 3-

***************************************	ICLES:	
Α.	Make / Model / Year / Mileage	
		Est. Value \$
B.	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 \$
	LESTATE: (not including your primanum single family residential lot size sp	ry residence and up to the greater of 2 acres or the secified in the local zoning ordinance.)
Property Type		In Town/State
**Pro	wide copy of property tax bill.	Est. Value \$
		TOTAL Of All ASSETS \$
condit inform	tion to the best of my knowledge. I furt	above is a correct and accurate accounting of my financial her authorize any agency or financial institution to release rds to any agent of the [Town]. I release all persons he release of this information.
APPLICANT'S SIGNATURE:		DATE:
PRIN	TED NAME:	
SPOU	SE'S SIGNATURE:	DATE:
PRIN	TED NAME:	
TELE	PHONE NUMBER:	
PLEA	SE RETURN THIS QUESTIONAIRE	BY
C		KEPT CONFIDENTIAL EXCEPT THAT THE ENT OF REVENUE ADMINISTRATION OR HIS

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).