

TOWN OF EPSOM APPLICATION FOR ELDERLY EXEMPTION (Page 1 of 2)

RSA 72:39a + RSA 72:39b

DEADLINE TO FILE:

April 15th

Name of Applicant: _____ Applicant must re-qualify at-least once every five years.	If property is in a Trust – Please enter Trust name here.	
Name of Spouse (if applicable):		
Applicant's Date of Birth & Age:	Date of Birth:	Age:
Spouse's Date of Birth & Age (if applicable):	Date of Birth:	Age:
Telephone:		
Address:		
Map / Lot:		
Marital Status:	Single: <input type="checkbox"/>	Married: <input type="checkbox"/> Widow(er): <input type="checkbox"/>
Residence is Owned....	Solely: <input type="checkbox"/>	With Spouse: <input type="checkbox"/>
	With Others: <input type="checkbox"/>	In Trust: <input type="checkbox"/>
	Joint Tenants: <input type="checkbox"/>	Tenants in Common: <input type="checkbox"/>
	% Owned:	
I have lived in New Hampshire since:	Year: _____	
Previous Address, if less than three years in Epsom:		
Have you ever received an elderly exemption from any other community in New Hampshire, or other state(s)?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
	If yes, name of other community:	

- INCOME INFORMATION - (Enter in Yearly Amounts) -	APPLICANT	SPOUSE
Social Security – for prior year: (Gross Amount)	\$	\$
Pension & Retirement – for prior year:	\$	\$
Wages – for prior year: (Include W-2 & 1099-MISC)	\$	\$
Other Income - for prior year: (Includes any IRA & 401(k) Distributions, Annuities, Reverse Mortgages, etc.)	\$	\$
Interest Income – for prior year:	\$	\$
Dividends Received – for prior year: (Includes any Stock, Bonds, Capital Gains, etc.)	\$	\$
Other Income Received – for prior year: (Includes any financial assistance from others)	\$	\$
Rental Income Received – for prior year: (Includes any financial assistance from persons living in household)	\$	\$
Other Income or Assistance <u>Not</u> listed above – for prior year: (Includes any Fuel, Electric, Food Assistance, etc.)	\$	\$
Verification of the above MUST be Submitted – Total for prior year Income:	\$	\$

Life Insurance Payment(s) Received? If yes, amount?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	\$
Are you required to file an Interest and Dividend Tax Return to the State of New Hampshire?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
Did you file an IRS Tax Return for prior year?	Yes: <input type="checkbox"/> -Provide prior year Return-	No: <input type="checkbox"/>

- ASSET INFORMATION - (Enter in Yearly Amounts) -		Single Family	Multi-Family: <input type="checkbox"/>
Type of property for which exemption is being claimed: If multi-family, in which unit # do you reside?			Unit #:
<u>FUNDS</u>		Type: _____ Institution: _____ Value: \$ _____	_____
List the market value of Stocks, Bonds, Certificates of Deposit, Money Markets, Mutual Funds, IRA's, 401(k)'s, etc.		Type: _____ Institution: _____ Value: \$ _____	_____
		Type: _____ Institution: _____ Value: \$ _____	_____
		Type: _____ Institution: _____ Value: \$ _____	_____
<u>BANK ACCOUNTS</u>		Checking: _____ Institution: _____ Balance: \$ _____	_____
List current balances of <u>all</u> bank accounts in your (and your spouse's name – if applicable):		Savings: _____ Institution: _____ Balance: \$ _____	_____
		Other: _____ Institution: _____ Balance: \$ _____	_____
<u>VEHICLE 1</u>		Make: _____ Model: _____ Year: _____ Mileage: _____ Est. Value: \$ _____	_____
Please provide the following vehicle information: Please <u>call dealer or use</u> Kelley Blue Book to get the estimated value. (Includes Cars, Trucks, Boats, RV's, Motorcycles, etc.)			
<u>VEHICLE 2</u>		Make: _____ Model: _____ Year: _____ Mileage: _____ Est. Value: \$ _____	_____
<u>PERSONAL PROPERTY</u>		Household: _____ Paintings: _____ Jewelry: _____ Antiques and / or Other: _____ Est. Value: \$ _____	_____
Estimated value of personal property (household furnishings, paintings, jewelry, etc.)			
Verification of the above MUST be submitted - Total for prior year Assets		\$ _____	\$ _____

<u>OTHER REAL ESTATE</u>			
Current mortgage on your Epsom, NH residence?		Balance:	\$ _____
Bank holding mortgage? Please provide copy of mortgage statement.		Bank Name:	_____
Is there a reverse mortgage on your property? If yes, amount?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>		\$ _____
Do you own any other real estate other than your Epsom, NH residence? If yes, please provide a copy of the most recent tax bill for any other real estate owned.	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	
	Property Type: _____ Town & State: _____ Est. Value: \$ _____		\$ _____
I swear, under the penalty of perjury, that all the above is a correct and accurate accounting of my financial condition to the best of my knowledge. I further authorize any agency, or financial institution to release information about me or copies of my records to any agent of the Town of Epsom Assessing office. I release all persons whomsoever from any liability arising out of or resulting from the release of this information.			
Date: _____	Date: _____		
Applicant's Signature: _____	Spouse's Signature: _____		

