

## Disabled Exemption Application NH RSA 72:37-b

Owner #1: \_\_\_\_\_ Owner #1 Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner #2: \_\_\_\_\_ Owner #2 Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Mailing \_\_\_\_\_ Married \_\_\_\_\_ Widow/Single \_\_\_\_\_ Divorced\* \_\_\_\_\_

Address \_\_\_\_\_ \*new applicants: divorce decree must be provided  
If currently married, how many years \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ NH resident since \_\_\_\_\_ (year)  
When did you purchase the property? \_\_\_\_\_ (year)

Property Single Family \_\_\_\_\_ Multi Units \_\_\_\_\_  
Single Family with in-law dwelling? \_\_\_\_\_ Is a business operated out of home? Yes \_\_\_\_\_ No \_\_\_\_\_

Property Ownership Individually \_\_\_\_\_ % owned \_\_\_\_\_ If yes, entire business IRS filing must be provided.  
In a Trust\* \_\_\_\_\_ Life Estate\* \_\_\_\_\_

\*Trust or Life Estate the **entire** trust/life estate document Town Map/Lot \_\_\_\_\_  
must be provided unless previously submitted.

**INCOME: ANNUAL Gross Income Information: from ALL SOURCES**

1. Social Security (1099 must be provided)	\$ _____	\$ _____
2. Social Security for Dependents (1099 must be provided)	\$ _____	\$ _____
3. Salaries, Wages, Tips or Self Employment	\$ _____	\$ _____
4. Pensions	\$ _____	\$ _____
5. Distributions (IRA, Annuities)	\$ _____	\$ _____
6. Interest Income (all sources)	\$ _____	\$ _____
7. Dividend Income (all sources)	\$ _____	\$ _____
8. Rental Real Estate Income	\$ _____	\$ _____
9. Unemployment benefits/VA Benefits	\$ _____	\$ _____
10. Does anyone other than spouse live with you? Y____ N _____ If yes, amount contributed to household (rent, bills or financial assistance)	\$ _____	\$ _____
11. Business Income	\$ _____	\$ _____
12. Capital Gain	\$ _____	\$ _____
13. <b>Any other</b> income or financial support or assistance (alimony/child support, fuel assistance, food stamps, Lottery winnings etc...)	\$ _____	\$ _____
<b>TOTAL INCOME</b>	\$ _____	\$ _____
1. Deduct proceeds from sale of an asset (attach documentation)	- _____	- _____
2. Deduct life insurance received on a death of an insured	- _____	- _____
3. Deduct expenses & costs incurred in the course of conducting a business enterprise	- _____	- _____
<b>TOTAL COMBINED INCOME</b>	\$ - _____	

**The following documentation MUST be submitted with your application.**

- Age verification: a copy of your driver's licenses, birth certificate or passport
- Entire Federal IRS filing with all W2's and 1099's for the year preceding. Personal and business
- Year-end bank statements – savings & checking **entire DECEMBER 1-31<sup>st</sup> statement**
- All year end statements (entire statement, not ending balance) for CD's, IRA's, stocks, bonds, annuities etc...
- Property tax bill for any additional property other than your legal and primary residence in Auburn, NH
- **All income and asset documentation MUST be provided to verify your eligibility. Without this documentation, your application will not be processed.**

# **APPLICANTS ASSETS**

**Deadline to file is April 15<sup>th</sup>**

*The following financial information will be verified through all resources available to the Assessor's Office & Town of Auburn.*

## **STEP 1 FINANCIAL**

Checking Acct # last 4 digits	Bank Name	Balance/Value	Notes:
		\$	
		\$	
<b><u>FULL 31 days of DECEMBER STATEMENT MUST BE ATTACHED</u></b>			

Savings Acct # last 4 digits	Bank Name	Balance/Value	Notes:
		\$	
		\$	
<b><u>FULL 31 days of DECEMBER STATEMENT MUST BE ATTACHED</u></b>		\$	

Credit Union Acct # last 4 digits	Bank Name/ Company Institution	Balance/Value	Notes:
		\$	
		\$	
<b><u>FULL 31 days of DECEMBER STATEMENT MUST BE ATTACHED</u></b>		\$	

IRA Acct #	Company Name/Institution	Balance/Value	Notes:
		\$	
		\$	
<b><u>FULL 31 days of DECEMBER STATEMENT MUST BE ATTACHED</u></b>		\$	

CD/Money Market Acct #	Company Name/Institution	Balance/Value	Notes:
		\$	
		\$	
<b><u>YEAR END STATEMENT MUST BE ATTACHED</u></b>		\$	

Annuities Acct #	Company Name/Institution	Balance/Value	Notes:
		\$	
		\$	
<b><u>YEAR END STATEMENT MUST BE ATTACHED</u></b>		\$	

Stocks/Bonds Acct #	Company Name/Institution	Balance/Value	Notes:
		\$	
		\$	
<b><u>YEAR END STATEMENT MUST BE ATTACHED</u></b>		\$	

Mutual Funds Acct #	Company Name/Institution	Balance/Value	Notes:
		\$	
		\$	
<b><u>YEAR END STATEMENT MUST BE ATTACHED</u></b>		\$	

Life Ins. Policy Acct #	Company Name/Institution	Balance/Value	Notes:
Whole ____ or Term ____		\$	
Whole ____ or Term ____		\$	
<b><u>CERTIFICATE MUST BE ATTACHED</u></b>			

Use additional sheet if necessary.

**STEP 2 VEHICLES**

VEHICLE INFORMATION		RECREATION/UTILITY (Boats, Motorcycle, RV, Trailers, ATVs, Snowmobiles etc...)	
Year Make Model & Mileage	Value	Year Make Model	Value
	\$		\$
Loan Balance \$	Lease/Own	Loan Balance	

Year Make Model & Mileage	Value	Year Make Model	Value
	\$		\$
Loan Balance \$	Lease/Own	Loan Balance	

**ASSET TOTAL (TOTAL OF STEPS 1-2)     \$\_\_\_\_\_**

**STEP 3 - REAL ESTATE**

**Current Mortgage on your Auburn, NH residence? Please provide copy of mortgage statement.**

Monthly Payment:	\$		
Balance	\$		
Bank Holding Mortgage?			

**OTHER REAL ESTATE**

Do you own any other real estate other than your Auburn residence (individually or jointly) **ANYWHERE** including homes, land, mobile homes, time share, camps etc... Yes \_\_\_ No \_\_\_ (must include copy of tax bill for **any other** real estate owned)

Location: \_\_\_\_\_ Property Market Value: \$\_\_\_\_\_

(address)                                      (City)                                      (State)

***All financial YEAR-END statements MUST be provided. Without this documentation, your eligibility can not be verified and the application will not be processed. All documentation will be considered confidential and treated as such. If you would like the copies returned, provide a self-addressed stamped envelope. If a self-addressed stamped envelope is not provided your documents will be shredded after processing. Would you like copies mailed back to you? Yes\_\_\_ No\_\_\_ Stamped envelope provided? Yes\_\_\_ No\_\_\_***

☐ *I swear, under penalty of perjury, that the information provided in this income and asset statement that will be used to determine my eligibility for the property tax exemption, is a correct and accurate account of my/our financial condition. I/We understand that the Assessing Department will verify the information that I/we disclosed through all resources available to the Town of Auburn and to the Assessing Department.*

\_\_\_\_\_  
Property owner #1 signature

\_\_\_\_\_  
Property owner #2 signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Printed name

### **PERMISSION**

The Town of Auburn will not release or discuss your information with any party without your express written permission. If you would like us to discuss your application with a friend, family member, caregiver or financial advisor please complete the following.

I/We \_\_\_\_\_ give the Town of Auburn Assessing Department permission to discuss with \_\_\_\_\_ any financial information necessary to complete my tax exemption application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contact name / relationship / telephone #

### **Asset & Income Limits**

Applicant's Assets cannot exceed \$100,000 – not including your primary and legal residence in Auburn, NH, and up to (2) acres of land. If your residence is a 2 or more-family residence, the multi-unit portion of the property is considered an asset.

Applicant:

If Single, must have a Gross Income less than: \$29,700

If Married, must have a combined Gross Income less than: \$38,500

### **Current Exemption Amount**

\$50,000 – Property Valuation Reduction

### **Qualifications**

- Applicant must be under 65 years of age.
- Once applicant turns 65, they must apply for the Elderly Exemption, as by law, the Applicant may not receive both the Disabled and Elderly exemptions.
- Applicant must provide documents stating they are determined eligible under Title II or Title XVI of the Federal Social Security Act for benefits to the disabled and is, applied for on a yearly basis.
- Applicant must reside in the State of NH for at least five (5) consecutive years preceding April 1<sup>st</sup> in the year in which the exemption is claimed.
- Applicant must own residential property in town, and it must be his/her principal place of abode, or if the residence is owned by the spouse, they must have been married for at least five (5) years.

### **Required Documentation**

The following documents will be required to verify your eligibility, including but not limited to:

- **Documentation of any Fuel, Electric, Rental and/or Assistance from Others**
- **Bank Statement(s) from All Banks/All Pages – for the last 3 months – including Checking, Savings, Stocks, Bonds, Certificates of Deposit, Money Markets, Mutual Funds, IRAs, etc.**
- Age verification: a copy of your driver's licenses, birth certificate or passport
- Updated Letter from Social Security Administration stating Title II or Title XVI
- W-2's – If Applicable – for 2022
- Social Security Benefit Statement(s) – for 2022
- Mortgage/Reverse Mortgage Statement(s)
- Dividend Statement(s) & Interest Income Statement(s) – for 2022
- 401k Statement(s) – for December 2022
- Federal Income Tax Return – for 2022
- Trust document & Statement of Qualification Sheet – If Applicable
- If applicant or spouse is receiving a property tax exemption, tax credit or homestead exemption in another town, city or state, applicant is not eligible for a property tax exemption in Auburn.