Senior/Surviving Spouse or Minor Tax Exemption Clause 17D is purely “Asset Based” and does not consider personal income. In order to qualify, the applicant will need to document:

**AGE:** Applicant is at least 70 years of age as of July 1, 2020  
**OR**  
**SURVIVING SPOUSE:** Spouse deceased prior to July 1, 2020

**OWNERSHIP:** Surviving Spouse or Minor owns the property in Revere as of July 1, 2020. Senior owns the property in Revere for not less than five years.

**DOMICILE:** Surviving Spouse or Minor has occupied the property in Revere as of July 1, 2020. Senior occupies the property in Revere for not less than five years.

**ASSETS:** Assets of applicant is less than $67,379

➢ **HOW TO COMPLETE THE APPLICATION:**

1. Fill out Sections A, B, C and D  
2. Document **ALL** sources of Assets attributable to the applicant  
3. Attach all supporting documentation

**CHECK LIST**

- Senior - Birth certificate to show proof of age – 70 as of July 1, 2020 (first year only)  
- Surviving Spouse – Death certificate of spouse prior to July 1, 2020 (first year only)  
- Proof of property ownership as of July 1, 2020 (Assessing records, Deed)  
- Proof of occupancy of home in Revere as of July 1, 2020 (Voter registration, 2 utility bills, tax return)  
- Statement of all Asset: Examples: Savings, Checking, CD’s, IRA, Money Market, Stocks, Bonds, Motor Vehicle, Other Real Estate and Personal Property.  
- 2019 Tax Return  
- Trust documents and Affidavit of Trust if home is in a trust  
- Completed Application

Submit completed application to: Revere Assessor’s Office  
281 Broadway  
Revere, MA 02151

**Filing deadline for Fiscal Year 2021 is April 1, 2021**
State Tax Form 96-6
The Commonwealth of Massachusetts

CITY OF REVERE

SENIOR 70 AND OLDER - SURVIVING SPOUSE

FY 2021 APPLICATION FOR STATUTORY EXEMPTION

General Laws Chapter 59, Section 5

Assessors Use Only (YELLOW)
17D
Date Received
Application #
Parcel ID:
Ownership
Occupancy
Status
Income
Assets
Granted
Denied
Deemed Denied
Date Voted:

This application is not open to public inspection (GL Chapter 59, Section 60). It must be filed with the Board of Assessors on or before December 15 or 3 months after actual (not preliminary) tax bills are mailed for Fiscal Year if later. Filing this form does not stay the collection of your taxes.

INSTRUCTIONS: Complete all sections fully. (Please print or type.)

A: IDENTIFICATION.

Name of Applicant: ________________________________
Marital Status: ________________________________

Social Security No. (optional): ________________________________
Tel No.: ________________________________

Legal Residence (Domicile) on July 1, 2020: ________________________________

Mailing Address (if different): ________________________________

Location of Property: ________________________________
No. of Dwelling Units: __________________

Did you own the property on July 1, 2020? Yes No
If yes, were you Sole Owner Co-Owner with Spouse only Co-Owner with others

Was the Property subject to a trust as of July 1, 2020? Yes No
(If yes, attach trust instrument including all schedules.)

Have you been granted any exemption in any other city or town for this year? Yes No
If yes, name of City or Town ________________________________
Amount exempted $ __________________

B. EXEMPTION STATUS.
Have you owned and occupied the property as your domicile for at least 5 years? Yes No
If no, list the properties you owned / or occupied during the past 5 years on next page.

Date of Birth: ________________________________
(If first year of application, attach copy of birth certificate)

Please indicate if you are a surviving spouse: ____________
and complete the questions that follow.

Deceased spouse's name: ________________________________
Date of death: ________________________________
Have you remarried: Yes No
If yes, date of remarriage: ________________________________

(If first year of application, please attach copy of death certificate)
If necessary, list the properties you owned and/or occupied during the past 5 years.

<table>
<thead>
<tr>
<th>Address</th>
<th>Dates</th>
<th>Owned</th>
<th>Occupied</th>
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</thead>
<tbody>
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</tbody>
</table>

C. VALUE OF ALL PROPERTY OWNED ON JULY 1 THIS YEAR
Documentation may be requested to verify your assets.

REAL ESTATE:  
Assessed Valuation  
Amount Due on Mortgage  
VALUE

Domicile  
Other  

PERSONAL ESTATE:
Bank Accounts: Name and Address of Bank  
(Savings/Checking Accounts, Money Market, CD’s, IRA etc)

<table>
<thead>
<tr>
<th>Account No.</th>
<th>Amount</th>
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Stocks, Bonds, Securities, Etc.: Description

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<tr>
<th>Amount</th>
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Motor Vehicles and Trailers
Year  
Make  
Model  
Amount

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Other Non-Exempt Personal Property
Kind  
Description  
Amount

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D. 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 are true, correct and complete. I hereby authorize any and all persons, agencies and institutions to release to the Revere Board of Assessors any and all information to verify eligibility for a tax exemption in conjunction with Chapter 59 Section 5 of the Massachusetts General Laws. The information obtained will be kept confidential and will be used only in connection with the application or pending with the Revere Board of Assessors.

Your Signature  
Date

If signed by an agent, attach copy of written authorization to sign on behalf of taxpayer.