FISCAL YEAR 2021 SENIOR TAX EXEMPTION – CLAUSE 41C ½

Senior Tax Exemption Clause 41C ½ is purely “income based” and does not consider personal assets. In order to qualify, the applicant will need to document:

**AGE:** Applicant is at least 65 years of age as of July 1, 2020

**OWNERSHIP:** Applicant owns the property in Revere as of July 1, 2020 and has owned that property or another property in Massachusetts as a domicile for any 5 years

**DOMICILE:** Applicant has occupied the property in Revere as of July 1, 2020 and has been domiciled in Massachusetts for the preceding 10 years

**INCOME:** Income of applicant was less than $60,000 in calendar year 2019

➢ **HOW TO COMPLETE THE APPLICATION:**

1: Fill out Sections A, B, C and D
2: Document **ALL** sources of income attributable to the applicant
4: Attach Copies of all supporting documentation

**CHECK LIST**

- A Copy of Birth certificate to show proof of age – 65 as of July 1, 2020 (first time only)
- Proof of property ownership as of July 1, 2020 (Assessing records or Deed)
- Proof of occupancy of home in Revere as of July 1, 2020 (Voter registration or 2 utility bills, tax return)
- Statement of all income sources: IRA accounts, pensions, rents, social security, etc
- A copy of State and/or Federal Income Tax Return from calendar year 2019 (if filed)
- Trust documents and Affidavit of Trust if home is in a trust
- Completed Application

Please provide copies of all documents, copies will not be made

Income information for filing Fiscal Year 2021 is calendar year 2019

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

Filing deadline for Fiscal Year 2021 is April 1, 2021
CITY OF REVERE

SENIOR 65 AND OLDER

FY 2021 APPLICATION FOR STATUTORY EXEMPTION

General Laws Chapter 59, Section 5

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: __________

Telephone Number: __________________________

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.**

Date of Birth __________________________

(If first year of application, attach copy of birth certificate)

Have you owned and occupied the property as your domicile for at least 11 years? _____Yes _____No

If no, list the properties you owned / or occupied during the past 11 years.

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<th>Address</th>
<th>Dates</th>
<th>Owned</th>
<th>Occupied</th>
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Continue list on attachment in same format as necessary
C. GROSS RECEIPTS FROM ALL SOURCE IN PRECEDING CALENDAR YEAR.
Copies of your federal and state income tax returns may be requested to verify your income.

Retirement Benefits (Social Security, Railroad, Federal Mass and Political Subdivisions) __________

Other Pensions and Retirement Allowances __________

Wages, Salaries and other Compensation __________

Net Profits from Business and Profession or Property Rental __________

Interest and Dividends __________

Other Receipt (Capital Gains, Public Assistance, etc) __________

TOTALS __________

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.

Applicant Signature ___________________________ Date __________

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