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

**AGE**: Applicant is at least 65 years of age as of July 1, 2022

**OWNERSHIP**: Applicant owns the property in Revere as of July 1, 2022 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, 2022 and has been domiciled in Massachusetts for 10 consecutive years before July 1, 2022.

**INCOME**: Income of applicant was less than $62,000 in calendar year 2021

➢ **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, 2022 *(first time only)*
- Proof of property ownership as of July 1, 2022 (Assessing records or Deed)
- Proof of occupancy of home in Revere as of July 1, 2022 (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 2021 (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 2023 is calendar year 2021

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

**Filing deadline for Fiscal Year 2023 is April 3, 2023**
State Tax Form 96-1
The Commonwealth of Massachusetts

CITY OF REVERE

SENIOR 65 AND OLDER

FY 2023 APPLICATION FOR STATUTORY EXEMPTION

General Laws Chapter 59, Section 5

Assessors Use Only (BLUE)
41C 1/2
Date Received
Application #_______
Parcel ID:
__Ownership
__Occupancy
__Status
__Income
__Age
__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: _________

Telephone Number: ________________

Legal Residence (Domicile) on July 1, 2022________________________________________

Mailing Address (if different): ______________________________________________________

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

Did you own the property on July 1, 2022? ___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, 2022?
(If yes, attach trust instrument including all schedules.) ___Yes ___No

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.

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

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.