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, 2018

**OWNERSHIP:** Applicant owns the property in Revere as of July 1, 2018 and has owned that property or another property in Massachusetts as a domicile for 5 years.

**DOMICILE:** Applicant has occupied the property in Revere as of July 1, 2018 and has been domiciled in Massachusetts for the preceding 10 years

**INCOME:** Income of applicant was less than $57,000 in calendar year 2017

➢ **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 all supporting documentation

**CHECK LIST**

- Birth certificate to show proof of age — 65 as of July 1, 2018
- Proof of property ownership as of July 1, 2018 (Assessing records, Deed)
- Proof of occupancy of home in Revere as of July 1, 2018 (Voter registration, 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 2017 (if filed)
- Trust documents and Affidavit of Trust if home is in a trust
- Completed Application

Income information for filing Fiscal Year 2019 is calendar year 2017

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

**Filing deadline for Fiscal Year 2019 is April 1, 2019**
INSTRUCTIONS: Complete all sections fully. (Please print or type.)

A: IDENTIFICATION.

Name of Applicant: ___________________________ Marital Status: ____________

Telephone Number: __________________________

Legal Residence (Domicile) on July 1, 2018

Mailing Address (if different):

Location of Property: __________________________ No. of Dwelling Units: __________

Did you own the property on July 1, 2018? ____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, 2018? ____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.

<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>
<td>________</td>
</tr>
<tr>
<td>_____________________________</td>
<td>______</td>
<td>______</td>
<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.

<table>
<thead>
<tr>
<th>Description</th>
<th>Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retirement Benefits (Social Security, Railroad, Federal</td>
<td></td>
</tr>
<tr>
<td>Mass and Political Subdivisions)</td>
<td></td>
</tr>
<tr>
<td>Other Pensions and Retirement Allowances</td>
<td></td>
</tr>
<tr>
<td>Wages, Salaries and other Compensation</td>
<td></td>
</tr>
<tr>
<td>Net Profits from Business and Profession or Property Rental</td>
<td></td>
</tr>
<tr>
<td>Interest and Dividends</td>
<td></td>
</tr>
<tr>
<td>Other Receipt (Capital Gains, Public Assistance, etc)</td>
<td></td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td></td>
</tr>
</tbody>
</table>

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.