

DENY: \_\_

## APPLICATION DEADLINE – AUGUST 31st <u>EACH</u> YEAR TOWN OF SHUTESBURY

## MEANS TESTED REAL ESTATE EXEMPTION APPLICATION

Contact SHUTESBURY BOARD OF ASSESSORS with Questions: 413.259.3790 / Assessor@shutesbury.org

In order to be eligible for this exemption, the following requirements MUST be met:

- 1. You, or at least one joint applicant, must have owned <u>and</u> occupied a home in Shutesbury as your principal residence for the last ten (10) consecutive years.
- 2. You must have filed a Massachusetts State Tax Form Schedule CB (Circuit Breaker) and qualified for a Circuit Breaker credit for the previous calendar year.
- 3. Primary applicant must be 65 and any joint applicant must be 60 by December 31st of the previous calendar year.

## THIS APPLICATION MUST BE RECEIVED IN THE ASSESSORS' OFFICE BY AUGUST 31st Each Year.

-	plete applications or those missing supporting documentation will not be p		*
1.	Name of Applicant(s):		
	Address:		
	ty/Town:	State:	Zip:
Ma	ailing Address if different		
	Home Phone: Cell/Work Phone		
	Email Address:		
2.	Applicant Date of Birth: Joint Applicant Date o	of Birth:	<i></i>
	Valid Massachusetts ID: Joint Applicant Valid N	Massachusetts ID	):
3.	Date you purchased your property:/ If less than 10 y ownership address and date:		
4.	Is property subject to a trust? If yes, please attach trust a	document and all	schedules.
5.	Do you own any other real estate? If yes, please provide addr	ress(es) and inclu	ide on assets list on back:
6.	Have you been granted any tax exemption in any other city or town?	Where's	?
7.	Your assets TOTAL as of December 31 of previous year:	Use works	heet on back of this application.
8.	Provide your MA Circuit Breaker Income Tax Credit amount from the p	previous calendar	r year: \$
<u>Please</u>	attach a copy of your previous calendar year State Income Tax filing, and	d the correspondi	ing MA Schedule CB.
Subscri	ibed this,,	, under the	pains and penalties of perjury.
Applica	ant Signature:Joint Applicant	signature:	
The	filing of this application does not stay the collection of your real estate issued if the exemption is allo	_	1 credit will be applied or a refund
BOARI	D OF ASSESSORS ACTION for Map/Parcel:/ Date Recei	<u>ived:</u> /	
APPROV	VE: EXEMPTION AMOUNT: \$		

BOARD OF ASSESSORS:

## COMPLETE LIST OF YOUR ASSETS AS OF DECEMBER 31 OF PREVIOUS YEAR. For Means-Tested Real Estate Exemption application. NOT open to public inspection.

Please list all assets to which you have legal title and access as sole, joint owner or trustee, that contribute to your total worth, <u>excluding</u> your residence. Assets include: Real estate other than your primary residence, bank checking & savings accounts, and CD's, brokerage and retirement accounts, bonds, money market certificates, stocks, etc., motor vehicles, RV's boats, and trailers.

Other operty	Location	Assessed Valuation	Amt. Due on	Mortgage	Net Value:
	onal Estate  Bank Accoun	ats: Name & Address of Bank			<u>Value:</u>
	Brokerage an	d Retirement Accounts:			Value:
	Motor Vehicle	es, RV's, Boats & Trailer	s: Year, Make & M	odel:	Value:
		le Personal Property art, jewelry, etc.: Kind & 1	Description:		Value:
			I Value of Persor		

PLEASE DELIVER THIS APPLICATION IN A SEALED ENVELOPE LABELED "FOR SHUTESBURY ASSESSORS ONLY" BY AUGUST 31 EACH YEAR. S