



# CITY OF CONCORD, NEW HAMPSHIRE

ASSESSING DEPARTMENT  
CITY HALL, 41 GREEN STREET, 03301  
(603) 225-8550; Fax (603) 225-8534

## 2016 ELDERLY EXEMPTION GUIDELINES

### FILING PERIOD:

- After January 1, 2016 (but you will need all 2015 year-end statements)
- Deadline is April 15, 2016.

### TO QUALIFY YOU MUST:

- Be 65 years of age and owner of record on or before April 1, 2016, or you have retained a Life Estate;
- Be a NH resident for three years prior to April 1, 2016;
- Reside at the property where exemption is being applied for;
- An applicant who has owned the residence by April 1, individually or jointly; or if a spouse owns the residence, the couple must be married or in civil union for five years or more;
- If the applicant received a transfer of real estate from a person under the age of 65 who is related to the applicant by blood or marriage within the preceding 5 years, no exemption shall be allowed, pursuant to RSA 72:40a, limitations.

### INCOME LIMITATION:

- \$33,400 Gross Income limitation for single, widowed, or divorced
- \$45,800 Gross Income limitation for married/civil union

### ASSET LIMITATION:

- \$90,000 Asset limitation for single and married taxpayers (excluding the value of your dwelling unit)

#### Assets Include:

- All personal property such as cars, trucks, RV's, trailers, antiques;
- Checking and savings account balances;
- CD's, IRA's, mutual funds, stocks, bonds, annuities, money markets, etc., life insurance policies;
- Any other real estate owned in Concord or anywhere (individually, jointly, in common, fractional) including land, mobile homes, condos, timeshares, etc. (Supporting documents must be supplied, up to and including the balance as of December 31).

### DOCUMENTS THAT MUST BE PROVIDED:

- 2015 Federal Income Tax return, including all W2's, 1099's, etc.;
- 2015 Social Security Benefit Statements;
- 2015 VA Benefits Statements;
- 2015 State Interest and Dividends Tax Forms;
- Bank Statements – Full copy (all pages) of year-end statement for all checking and savings accounts;
- Current statements for CD's, IRA's, 401K's, stocks and/or bonds, surrender value of life insurance policies money market, etc., (full copies);
- Property Tax Inventory Forms filed in any other town;
- Driver's license (if applicable) and birth certificate;
- Documentation of any fuel, electric, rental, or any assistance from others;
- A complete Copy of Trust, Trust Amendments, and Form PA-33, if the property is held in a Trust.

### QUALIFIED APPLICANTS RECEIVE THE FOLLOWING EXEMPTION:

- 65 – 74 years of age are allowed \$72,818 assessed value deducted from total assessed value;
- 75 – 79 years of age are allowed \$118,420 assessed value deducted from total assessed value;
- 80+ years of age are allowed \$202,124 assessed value deducted from total assessed value.



# CITY OF CONCORD

## Elderly Exemption Application – Tax Year 2016

To be completed by owner seeking Tax Exemption, Per RSA 72:39a

Property Address: \_\_\_\_\_

Owners Name: \_\_\_\_\_

Owner's Date of Birth: \_\_\_\_\_

Co-Owner/Spouse Name: \_\_\_\_\_

Co-Owner's Date of Birth: \_\_\_\_\_

Married  Single  Widowed  Divorced

Contact Telephone Number: \_\_\_\_\_

Life Estate/Trust Name (if applicable) \_\_\_\_\_

(If property is owned by a Trust, a PA-33 must be completed with a full copy of Trust)

Do you own a multi-family home? Yes  No

Are you receiving a deduction or exemption from any other City or Town? Yes  No

Where is your primary place of abode? \_\_\_\_\_

### INCOME INFORMATION for the period of January 1 to December 31, 2015

Please answer all questions; if any of the following categories do not apply, please write N/A.

Supporting documents must be submitted with this application.

	Owner	Co-Owner (Spouse)
1. Social Security (gross, annual)	\$ _____	\$ _____
2. Social Security Disability Income	\$ _____	\$ _____
3. VA Benefits (Pension/Disability Income)	\$ _____	\$ _____
4. Wages/Salaries (gross)	\$ _____	\$ _____
Tips (gross)	\$ _____	\$ _____
5. Pensions	\$ _____	\$ _____
Annuities	\$ _____	\$ _____
401k, IRA's	\$ _____	\$ _____
6. All Interest Income (total of all accounts)	\$ _____	\$ _____
7. All Dividend Income (total of all accounts)	\$ _____	\$ _____
8. Real Estate Rental Income (Annual Amount)	\$ _____	
9. Other Income (Fuel, Electric Assistance, SSI, gambling, lottery)	\$ _____	
10. Is anyone other than a spouse or co-owner living with you?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
11. If Yes, please list amount of assistance received	\$ _____	
If Yes, please list amount of bills, or rent paid annually	\$ _____	

**TOTAL 2015 INCOME**    \$ \_\_\_\_\_

**CURRENT ASSET INFORMATION** as of December 31, 2015. All items must be answered, therefore, if any of the following categories do not apply, please write N/A.

12. Do you own (individually, jointly, in common, fractional, etc.) any other real estate in Concord or anywhere else, including homes, land, mobile homes, or time shares Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, other Real Estate: \_\_\_\_\_  
 (Street Address, City/Town/State) Market Value

(If applicable, please attach a copy of property tax bill)

13. Other Personal Property (a) \_\_\_\_\_  
 Description Value

(b) \_\_\_\_\_  
 Description Value

14. Vehicle 1 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Value: \_\_\_\_\_

Vehicle 2 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Value: \_\_\_\_\_

Vehicle 3 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Value: \_\_\_\_\_

15. Please attach a full copy of year-end statements on all of the following accounts:

Checking Account Number	Bank/Institution Name	Balance

Savings Account Number	Bank/Institution Name	Balance

CD Account Number	Bank/Institution Name	Balance

Money Market Account Number	Bank/Institution Name	Balance

IRA Account Number	Bank/Institution Name	Balance

Mutual Fund Account Number	Bank/Institution Name	Cash Out Value

Annuity Account Number	Bank/Institution Name	Cash Out Value

Stocks/Bonds Account Number	Bank/Institution Name	Cash Out Value

Life Insurance Policy Number	Bank/Institution Name	Cash Out Value

16. Other Assets (Explain): \_\_\_\_\_ Value \_\_\_\_\_

Assets disclosed by the applicant on this application will be verified through all resources available to the City of Concord Assessing Department.

**TOTAL CURRENT ASSETS** \$ \_\_\_\_\_

17 Did you file an income tax return for 2015? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, a copy needs to be submitted with your application.

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I/We, the undersigned, agree to repay the City of Concord, NH, for any exemption procured through willful misrepresentation. Misrepresentation or omission of information may result in denial of exemption from the City of Concord, NH.

Any Change in household circumstances (income or assets) must be reported to the Assessor's Office within 30 days. Failure to do so may result in suspension of assistance. I/We swear, under penalty of perjury, and certify that the information provided in the application, including income and asset statements, is true to the best of my/our knowledge.

My/Our signature(s) below constitute(s) the granting of my/our authority for the City of Concord, NH, to obtain verification and/or proof from all sources concerning my/our household's circumstances.

\_\_\_\_\_  
 Owner's Signature                      Date                      Co-Owner's Signature                      Date