

THE COMMONWEALTH OF MASSACHUSETTS

FY2016 WELLESLEY APPLICATION FOR PROPERTY TAX DEFERRAL SENIOR 65 AND OLDER

General Laws Chapter 59, Section 5

Wellesley	MA
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ASSESSORS USE ONLY

Clause: **41A**

Date Received:

Other Exemption: \$

Bill #:

Parcel ID:

Must be filed with Board of Assessors on or before December 15 or three months after actual (not preliminary) tax bills are mailed for fiscal year, if later.

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION (see General Laws Chapter 59, Section 60)

Tax Deferral and Recovery Agreement form 97-1 must accompany this application unless already on file and persons with interest in property remain the same.

INSTRUCTIONS:

**Please review and make any corrections to this form as soon as possible.
Fill in all shaded areas and verify their accuracy.
Sign on reverse.**

If you are unable to return this form now, remember that it must be filed with the Board of Assessors within three months of the date of mailing of the actual real estate tax bill. The Assessors anticipate mailing the actual fiscal year 2016 real estate tax bills sometime in December 2015.

A. IDENTIFICATION.

Name of Applicant: <input style="width: 90%;" type="text"/>	Date of Birth: <input style="width: 80%;" type="text"/>
Social Security No.: xxx-xx- <input style="width: 80%;" type="text"/>	Telephone No.: <input style="width: 80%;" type="text"/>
Legal Residence (domicile) on July 1: <input style="width: 80%;" type="text"/>	Marital status: <input style="width: 80%;" type="text"/>
Mailing Address (if different): <input style="width: 90%;" type="text"/>	
Location of property: <input style="width: 20%;" type="text"/> <input style="width: 80%;" type="text"/>	

Have you owned and occupied the property as your domicile for at least 5 years? **No**

If no, list the other properties you owned and / or occupied during the past 10 years.

Address	Dates	Owned	Occupied
<input style="width: 95%; height: 20px;" type="text"/>			
<input style="width: 95%; height: 20px;" type="text"/>			

Have you been granted any exemption in any other city or town (MA or other) for this year? **No**

If yes, name of city or town: Amount exempted:

Amount of tax you are seeking to defer this year: **Fiscal Year 2016 Interest Rate: .60%**

B. PERSONS WITH INTEREST IN PROPERTY.

Did you own the property on July 1? **No**

If yes, were you

Sole Owner? **No** Co-owner Spouse? **No** Co-owner with others? **No**

Was there a mortgage on the property as of July 1? **No**

If yes, the amount due on the mortgage: _____

Name of the mortgagee(s): _____

Was the property subject to a life estate on July 1? **No**

If yes, the name of the remaindermen (person receiving the property after your death):

Was the property subject to a trust as of July 1? **No**

(If yes, attach trust instrument including all schedules)

C. GROSS RECEIPTS FROM ALL SOURCES IN PRECEDING CALENDAR YEAR.

A copy of your 2014 federal tax return is requested to verify your income.

	APPLICANT AND SPOUSE	CO-OWNER(S) AND SPOUSE
Retirement benefits (Social Security, Railroad, Federal, Mass. and Political Subdivisions)	\$ _____	\$ _____
Other pensions and retirement allowances	\$ _____	\$ _____
Wages, salaries and other compensation	\$ _____	\$ _____
Net profits from business or profession	\$ _____	\$ _____
Interest and dividends	\$ _____	\$ _____
Other receipts (rent, capital gains, etc.)	\$ _____	\$ _____
TOTALS	\$ _____	\$ _____

D. SIGNATURE. Sign here to complete the application.

This application has been prepared or examined by me. Under pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete.

Your signature

Date

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