### TOWN OF BROOKLINE NH



Board of Assessors
Po Box 360 – 1 Main Street
Brookline NH 03033
Email kristen@brookline.nh.us
Phone #603-673-8855 ext.216
www.brooklinenh.us

## **ELDERLY EXEMPTION WORKSHEET**

Applications must be received by April 15, 2024

Exemption for the Elderly RSA 72:39a & 72:39b

# **Qualifications**

- At least 65 years of age
- A NH Resident for **3 consecutive years** on or before April 1, 2024
- Applicant must own residential property on or before April 1, 2024
- Must occupy the property as your principal abode for the elderly exemption.
- Married Couples must have been married for **5 consecutive years** on or before April 1, 2024

### TOTAL INCOME CANNOT EXCEED (all sources including retirement and social security)

➤ Single person \$60,000 per year or Married Couple \$100,000 per year

### TOTAL ASSETS CANNOT EXCEED (Excluding the Value of your principal place of abode)

➤ Single person \$750,000 or Married couple \$750,000

# **Exemption amounts if you qualify**

Age 65-75 \$120,000 of valuation

Age 75-80 \$ 180,000 of valuation

Age 80 and up \$240,000 of valuation

# **Documents to be submitted with Application**

- ➤ Bank statements-current full copies for all checking and savings accounts
- ➤ 2023 Federal Tax Return, including all W2's, 1099's, etc.
- ➤ 2023 Form SSA 1099- Social Security benefit Statement
- ➤ 2023 VA benefits
- > 2023 Interest and dividends tax forms
- Current full copies of statements for CD, IRA, 401K, stocks bonds, money market
- > Property tax card for any other towns that you own property in.
- ➤ Copy of your Trust Declaration if needed along with a PA-33 form
- ➤ Copy of Driver license or birth certificate
- ➤ Documentation of any fuel, electric, rental or any assistance from others.

# TOBS 1768

Tax ID Man

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# ELDERLY EXEMPTION QUALIFICATION WORKSHEET

Lot

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Application for Propert and any supporting docu	y Tax Credit/Exempuments will be return	submitted along with completed ptions. All information supplied with the supplied with the supplied of the considering submission of your approval or denial of the considering submission of your approval.	vill be treated confidentially application. Please note the
INCOME LIMI	TS: Single <b>\$60,0</b> 0	00 Married \$100,00	0
ASSET LIMIT:	Single <b>\$750,00</b>	Married \$750,00	0
completed form PA-33	S (Statement of Qua	r your property is owned by a translation) and submit a copy of ted Certification of Trust per RSA	of the Declaration of Trust,
Please print all informat	tion clearly:		
Applicant's Name: _			_
Spouse's Name:			_
Property Address: _			_
Mailing Address: _			<del>-</del>
Date of NH Residency			

(Three-year NH residency for elderly exemption, Five-year NH residency for all other exemptions.)

### **INCOME:**

Please list the source and amount of all income for year for both you and your spouse.

<b>SOURCE:</b> (Net income)	Applicant:	Applicant's Spouse:	Supporting Documentation
Social Security:	\$	\$	
Pension & Retirement	\$	\$	
Wages:	\$	\$	
Rental Income:	\$	\$	
Other Income/Annuities:	\$	<u>\$</u>	
Interest Income:	\$	\$	
Other	\$	\$	
Other	\$	\$	
Other	\$	\$	
TOTAL INCOME:	\$	\$	

If you have filed any of the following – please provide a copy.

- 1. Interest and Dividend tax return to the State of NH
- 2. Federal Income Tax Form
- 3. Any other documents as needed to verify eligibility

\_\_\_\_\_Check here if the applicant or applicant's spouse was not required to file a Federal Income Tax Return.

#### **ASSETS:**

Please list all assets owned (Self & Spouse)
Savings Accounts or Investments/Certificates: (CD's, Stocks & Bonds, IRA's, Annuities, Travel Trailers, Boats, Antiques, Cars etc.)

Institution Name	Account Type	Account #	Balance/Value

All accounts listed above must have a copy of the statement included with this application.

VE	HCLES:	
A.	Make / Model / Year / Mileage	
		Est. Value \$
B.	Make / Model / Year / Mileage	
	Ţ.	Est. Value \$
C.	Make / Model / Year / Mileage	
		Est. Value \$
D.	Boat / Model / Year	Est. Value \$
E.	RV / Model / Year	Est. Value \$
F.	Other / Description	Est. Value \$
G.	Other / Description	Est. Value \$
min Prop	imum single family residential lot size perty Type	ary residence and up to the greater of 2 acres or the specified in the local zoning ordinance.)  In Town/State
**Provide copy of property tax bill.		Est. Value \$
		Est. Value 5
		TOTAL of All ASSETS \$
the p	portion that is the applicant's residence is it-unit is considered to be an asset, an ins	an ADU) or more and/or has a business run out of it, only sexcluded from the asset limit. The remaining portion of the pection may be required to determine its value.
	Check here if your home is a multi-fa	•
	Check here if you have a business rur	out of your home.

I swear, under penalty of perjury, that all the above is a correct and accurate accounting of my financial condition to the best of my knowledge. I further authorize any agency or financial institution to release information about me or copies of my records to any agent of the Town of Brookline. I release all persons whomsoever from any liability resulting from the release of this information.

Vour signatura	Data
Name of that person, relationship	phone #
Name of that person, relationship	phone#
family member or caregiver.	ssessors to discuss your application with a friend,
TELEPHONE NUMBER:	
PRINTED NAME:	
SPOUSE'S SIGNATURE:	DATE:
PRINTED NAME:	
APPLICANT'S SIGNATURE:	DATE:

THIS QUESTIONAIRE WILL BE KEPT CONFIDENTIAL EXCEPT THAT THE COMMSSIONER OF THE DEPARTMENT OF REVENUE ADMINISTRATION OR HIS DESIGNEE SHALL HAVE ACCESS TO IT DURING THE DEPARTMENT'S FIVE YEAR ASSESSMENT REVIEW OF ASSESSING PRACTICES (RSA 21-J:11-a).

The Board of Assessors reserves the right check this information annually but not more frequently.

# Applications must be received before April 15, 2024 to qualify for the 2024 tax year

Brookline NH has long ago adopted the Elderly Exemption as allowed by RSA 72:39-a.