

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
**ASSESSING OFFICIALS' RESPONSE TO EXEMPTIONS/
 TAX CREDITS/DEFERRAL APPLICATION**

Property for which Exemption/Tax Credit/Deferral is claimed:

NOTE: "CU PARTNER" STANDS FOR "CIVIL UNION PARTNER"

STEP 1 NAME AND ADDRESS	PROPERTY OWNER'S LAST NAME Picard	FIRST NAME Henry	INITIAL G		
	PROPERTY OWNER'S LAST NAME Picard	FIRST NAME Deborah	INITIAL		
	MAILING ADDRESS 364 Woodstock St				
	CITY/TOWN Seabrook	STATE NH	ZIP CODE 03874		
	PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED 364 Woodstock St				
STEP 2 EXEMPTIONS/ TAX CREDITS/ DEFERRAL	CITY/TOWN TAX MAP # 20		BLOCK # 364	LOT #	
	VETERANS' TAX CREDIT			<u>Granted/Denied</u> <u>Date</u>	
	<input checked="" type="checkbox"/>	Veterans' Tax Credit \$50 minimum (to \$500)	Amount \$ <u>500</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	Service Connected Total & Permanent Disability \$700 minimum to \$2000	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	Surviving Spouse/CU Partner of Veteran Who Was Killed or Who Died on Active Duty \$700 minimum (to \$2000)	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	Review Discharge Papers (ei: Form DD214), Form # _____			
	<input type="checkbox"/>	Other Information _____			
	VETERANS' EXEMPTION			<u>Granted</u> <u>Denied</u> <u>Date</u>	
	<input type="checkbox"/>	Total Exemption	<input type="checkbox"/>	(a) Veteran	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>	(b) Surviving Spouse/CU Partner	<input type="checkbox"/>
APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS					
Income Limits	Disabled Exemption	Elderly Exemption	Elderly Exemption Per Age Category		
Single	\$ _____	\$ _____	65 - 74 years of age	\$ _____	
Married	\$ _____	\$ _____	75 - 79 years of age	\$ _____	
Asset Limits			80 + years of age	\$ _____	
Single	\$ _____	\$ _____			
Married	\$ _____	\$ _____			
OTHER EXEMPTIONS			<u>Granted</u> <u>Denied</u> <u>Date</u>		
<input type="checkbox"/>	Elderly Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Disabled Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Improvements to Assist the Deaf	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Improvements to Assist Persons with Disabilities	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Blind Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Deaf Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Solar Energy Systems Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Woodheating Energy Systems Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Wind-Powered Energy Systems Exemption	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
Elderly & Disabled Tax Deferral			<u>Granted</u> <u>Denied</u>		
<input type="checkbox"/>	Elderly and Disabled Tax Deferral	Amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	
For Deferrals: This page must be returned to the property owner after approval or denial on or before July 1st following the date of Notice of Tax under RSA 72:1-d by first class mail. (RSA 72:34,IV)					
STEP 3 COMMENTS/ NOTES	Municipal Comments/Notes				
STEP 4 SIGNATURES	Selectmen/Assessor(s) Printed Name	Signature of Selectmen/Assessor(s) in ink	Date		
	Aboul B. Khan, Chairman				
	Theresa Kyle				
	Ella Brown				
APPEAL PROCEDURE	If an application for a property tax exemption or tax credit is denied, an applicant may appeal in writing on or before September 1st following the date of notice of tax under RSA 72:1-d to the New Hampshire Board of Tax and Land Appeals (BTLA) or to the Superior Court. Example: If you were denied an exemption from your 2013 property taxes, you have until September 1, 2014, to appeal. Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301, their web site at www.nh.gov/btla or by calling (603) 271-2578. Be sure to specify EXEMPTION APPEAL .				

PROPERTY OWNER'S NAME

PROPERTY OWNER'S NAME

TAX MAP/BLCK/LOT

RECEIVED

MAR 23 2019

FORM PA-29

VC 2020

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS DUE DATE APRIL 15 PRECEDING THE SETTING OF THE TAX RATE

Town of Seabrook Assessor's Office

STEP 1 OWNER AND APPLICANT INFORMATION

OWNER: DEBORAH PICARD REVOC LIV TRUST
 APPLICANT'S FIRST NAME: Deborah
 APPLICANT'S LAST NAME: Picard
 APPLICANT'S FIRST NAME: Henry
 APPLICANT'S LAST NAME: Picard
 MAILING ADDRESS: 364 Woodstock Street
 CITY/TOWN: Seabrook STATE: NH ZIPCODE: 03874
 PROPERTY ADDRESS: 364 Woodstock Street TAX MAP: 20 BLOCK: 364 LOT:
 IS THIS YOUR PRIMARY RESIDENCE? YES NO

PROPERTY OWNER NAME

PROPERTY OWNER NAME

STEP 2 VETERAN'S INFORMATION

1. APPLICANT IS THE: Veteran Spouse Surviving Spouse
 2. APPLYING FOR: Tax Credit Veterans' Standard (RSA 72:28) Tax Credit for Service-Connected Total Disability (RSA 72:35) Tax Credit for Surviving Spouse (RSA 72:29-a "...of any person who was killed or died while on active duty...") Certain Disabled Veterans (Exemption) (RSA 72:36-a)
 3. Veteran's Name: Henry J. Picard Jr. Dates of Military Service: Enter (MMDDYYYY)
 4. Date of Entry: 9-11-57 5. Date of Discharge/Release: 8-15-1960
 IF A VETERAN OF ALLIED COUNTRY: (RSA 72:32)
 6. Name of Allied Country Served in: 7. Branch of Service: USMC
 8. Please Check One: US Citizen at time of entry into Service Alien but resident of NH at time of entry into Service
 9. Does any other eligible Veteran own interest in this property? YES NO If YES, provide name YES NO

STEP 3 EXEMPTIONS

10. Elderly Exemption (Must be 65 years of age on or before April 1 of year for which exemption is claimed) (RSA 72:39-a) (Enter numbers only MMDDYYYY) 10a. Applicant's Date of Birth: 10b. Spouse's Date of Birth:
 11. Improvements to Assist Persons with Disabilities (RSA 72:37-a)
LOCAL OPTIONAL EXEMPTIONS (if adopted by city/town)
 12. Blind Exemption (RSA 72:37) Solar Energy Systems Exemption (RSA 72:62)
 Deaf Exemption (RSA 72:38-b) Wind-Powered Energy Systems Exemption (RSA 72:66)
 Disabled Exemption (RSA 72:37-b) Woodheating Energy Systems Exemption (RSA 72:70)

STEP 4 RESIDENCY

13. NH Resident for One Year preceding April 1 in the year in which the tax credit is claimed (Veterans' Tax Credit) NH Resident for Five Consecutive Years (Deaf) or At least Five Years (Disabled) preceding April 1 in the year the exemption is claimed NH Resident for Three Consecutive Years preceding April 1 in the year the exemption is claimed (Elderly Exemption)

STEP 5 OWNERSHIP

14. Do you own 100% interest in this residence? Yes No If NO, what percent (%) do you own?

STEP 6 SIGNATURES

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.
 SIGNATURE (IN INK) OF PROPERTY OWNER: Henry J. Picard Jr. DATE: 3/28/19
 SIGNATURE (IN INK) OF PROPERTY OWNER: Deborah Picard DATE: 3/28/19

WHEN TO FILE Form PA-29 must be filed by April 15 preceding the setting of the tax rate. The municipal assessing officials shall send written notice to the taxpayer of their decision by July 1 prior to the date of notice of tax. Failure of the municipal assessing officials to respond shall constitute a denial of the application. (See instructions for more details)

APPEAL PROCEDURE If an application for a property tax exemption or tax credit is denied by the municipality, an applicant may appeal in writing on or before September 1 following the date of notice of tax under RSA 72:1-d, to the NH Board of Tax and Land Appeals (BTLA) or to the Superior Court in the county where the property is located. (See instructions for more details)

TAX MAP | BLOCK | LOT

2020
911 vet

VETERANS' CREDIT QUALIFICATIONS WORKSHEET
In Satisfaction of RSA 21-J:11-a Assessment Review Report Conducted Every Five Years

Name of Municipality: Seabrook
Name of Applicant: Henry Picard
Address of Applicant's Principal Place of Abode: 364 Woodstock St.
Map and Lot Number of Applicant's Principal Place of Abode: 20-364
Date of Original Application to Municipality: 3-28-19

Regular Veterans' Tax Credit (RSA 72:28)

Date Range of Active Duty From DD214 or other qualifying discharge papers;
(90 days must be within this range) 9-11-57 - 8-15-60 Name of Conflict: _____

Was veteran honorably discharged or separated from service? YES NO

If applicable, list any qualifying medals earned: none

For a list of qualifying medals go to: http://www.nh.gov/revenue/property_tax/veterans_medals_list.doc

For a list of qualifying discharge papers go to:
http://www.nh.gov/revenue/property_tax/Veterans_Qualifying_Discharge_Papers_Web_0804.doc

Documentation Reviewed By: Sandra Carli Application Approved by: at 1/14/20

Service Connected Total and Permanent Disability (RSA 72:35)

The municipality has seen a copy of the letter provided by the United States Department of Veterans' Affairs certifying that the applicant is rated totally and permanently disabled from service connection and has approved or denied this application accordingly.

Documentation Reviewed By: _____ Application Approved by: _____

Surviving Spouse of Veteran Who was Killed or Who Died While on Active Duty (RSA 72:29-a) or,
Certain Disabled Veterans (RSA 72:36-a)¹

For 72:29-a: The municipality has seen a copy of the DD214 discharge papers or a copy of the DD Form 1300, Report of Casualty, or other qualifying discharge papers of the veteran's spouse and has determined that the veteran, in this case, died or was killed while on active duty in the armed forces of the United States of America in the wars, conflicts or armed conflicts, or combat zones set forth in RSA 72:28 and has approved or denied this application accordingly.

For 72:36-a: The municipality has seen a letter from the VA certifying that the veteran did receive assistance from the VA in acquiring his residential real estate.

Documentation Reviewed By: _____ Application Approved By: _____

Date of Review: _____ Date of Review: _____ Date of Review: _____

LEGEND: Insert N/A to the items below which are not applicable

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME PICARD, Henry Joseph, Jr.,		2. SERVICE NUMBER 1560357		3a. GRADE, RATE OR RANK Cpl E-4		b. DATE OF RANK (Day, Month, Year) 10 Oct 59	
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS USMC		5. PLACE OF BIRTH (City and State or Country) Amesbury, Mass.		6. DATE OF BIRTH 6 Feb 39		7. MARITAL STATUS Married	
	7a. RACE Cauc.	b. SEX Male	c. COLOR HAIR Brown	d. COLOR EYES Hazel	e. HEIGHT 67"	f. WEIGHT 158	8. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
TRANSFER OR DISCHARGE DATA	10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED High School - 4		b. MAJOR COURSE OR FIELD Acad.		11a. TYPE OF TRANSFER OR DISCHARGE Transferred to		b. STATION OR INSTALLATION AT WHICH EFFECTED GasCo, MB, NS, TI, S Fran 30, Calif.	
	11b. REASON AND AUTHORITY "21C - Convenience of the Government, Paragraph 10271.1a Marine Corps Manual, MCO 1900.2B & MCO 1910.17		12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND VMA-332, MAG-12, 1st MAW c/e FPO S Fran 30, Calif.		13a. CHARACTER OF SERVICE HONORABLE		d. EFFECTIVE DATE 15 Aug 60	
	14. SELECTIVE SERVICE NUMBER Not Applicable		15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE Not Applicable		16. DATE INDUCTED Not Applicable		b. TYPE OF CERTIFICATE ISSUED DD FORM 217 MC	
SERVICE DATA	17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED AvnEnlVolRes, MARTC, NAS, Glenview, Illinois		18. TERMINAL DATE OF RESERVE OBLIGATION 26 Feb 62		19. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY <input type="checkbox"/> ENLISTED (First Entitlement) <input checked="" type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER:		b. TERM OF SERVICE (Years) Three	
	20. PRIOR REGULAR ENLISTMENTS NONE		21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE PFC		22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Boston, Mass.		c. DATE OF ENTRY 11 Sep 57	
	23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) West Main Street, Merrimac, Essex, Mass.		24. STATEMENT OF SERVICE		25a. SPECIALTY NUMBER AND TITLE 6412 - Aircraft Jet Engine Mechanic.		25b. RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER 5-80.100 - Airplane Mechanic.	
VA DATA	26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NONE		27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) NONE		28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING, COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED		29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED	
	30a. GOVERNMENT LIFE INSURANCE IN FORCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT Not Applicable		c. MONTH ALLOTMENT DISCONTINUED Not Applicable		d. VA CLAIM NUMBER	
	31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) Not Applicable		b. VA CLAIM NUMBER Not Applicable		32. REMARKS Recommended for reenlistment. Good Conduct Medal Period Commences: 11 Sep 57 (1st Awd) No periods in an excess leave status. 15 Lump Sum Leave Settlement Paid for 26 Days.		33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) West Main St. Merrimac, Essex, Mass.	
AUTHENTICATION	34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Henry J. Picard</i>		35. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER M. J. CLINTON, CAPT., USMC		36. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>M. J. Clinton</i>		37. DATE OF AUTHORIZATION 15 Sep 60	