

**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 Gilmore Jr		FIRST NAME J		INITIAL Andrew	
	PROPERTY OWNER'S LAST NAME Gilmore		FIRST NAME Marcia		INITIAL C	
	MAILING ADDRESS 67 Foggs Lane					
	CITY/TOWN Seabrook		STATE NH	ZIP CODE 03874		
	PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED 67 Foggs Lane					
STEP 2 EXEMPTIONS/ TAX CREDITS/ DEFERRAL	CITY/TOWN TAX MAP # 7		BLOCK # 51	LOT # 300		
	VETERANS' TAX CREDIT					
	<u>Granted/Denied</u> <u>Date</u>					
	<input type="checkbox"/>	Veterans' Tax Credit \$50 minimum (to \$500)		Amount \$	<input 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		
Single	\$		\$	38,000		
Married	\$		\$	58,000		
Asset Limits				Elderly Exemption Per Age Category		
Single	\$		\$	65 - 74 years of age	\$ 160,000	
Married	\$		\$	75 - 79 years of age	\$ 170,000	
				80 + years of age	\$ 200,000	
OTHER EXEMPTIONS						
<u>Granted</u> <u>Denied</u> <u>Date</u>						
<input checked="" type="checkbox"/>	Elderly Exemption	Amount \$	160,000		<input checked="" type="checkbox"/>	
<input type="checkbox"/>	Disabled Exemption	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Improvements to Assist the Deaf	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Improvements to Assist Persons with Disabilities	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Blind Exemption	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Deaf Exemption	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Solar Energy Systems Exemption	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Woodheating Energy Systems Exemption	Amount \$			<input type="checkbox"/>	
<input type="checkbox"/>	Wind-Powered Energy Systems Exemption	Amount \$			<input type="checkbox"/>	
Elderly & Disabled Tax Deferral						
<u>Granted</u> <u>Denied</u>						
<input type="checkbox"/>	Elderly and Disabled Tax Deferral		Amount \$			
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	
	Theresa Kyle, Chairman					
	Ella Brown					
	Aboul B. Khan					
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/BLOCK/LOT

Eld.

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

RECEIVED

FEB 28 2020

STEP 1 OWNER AND APPLICANT NAME AND ADDRESS	OWNER AND APPLICANT INFORMATION			
	OWNER			
	If required, is a PA-33 on file? <input type="radio"/> YES <input type="radio"/> NO			
	APPLICANT'S LAST NAME <u>marcia C. Gilmore + J Andrew Gilmore, Jr.</u>		APPLICANT'S FIRST NAME <u>marcia</u>	MI <u>C</u>
	APPLICANT'S LAST NAME <u>Gilmore</u>		APPLICANT'S FIRST NAME <u>J.</u>	MI <u>Andrew</u>
	MAILING ADDRESS <u>67 Foggs lane</u>			
	CITY/TOWN <u>Seabrook</u>		STATE <u>NH</u>	ZIP CODE <u>03874</u>
	PROPERTY ADDRESS <u>67 Foggs lane</u>		TAX MAP <u>7</u>	BLOCK <u>51</u> LOT <u>300</u>
	IS THIS YOUR PRIMARY RESIDENCE? <input type="radio"/> YES <input type="radio"/> NO			
	STEP 2 VETERANS' TAX CREDITS AND EXEMPTION	VETERAN'S INFORMATION		
1. APPLICANT IS THE:		2. APPLYING FOR:		
<input type="radio"/> Veteran		<input type="checkbox"/> Veterans' Tax Credit (RSA 72:28) Standard (\$50) / Optional (\$51 up to \$750)		
<input type="radio"/> Spouse		<input type="checkbox"/> All Veterans' Tax Credit (RSA 72:28-b) <i>If Adopted by Town</i> Standard (\$50) / Optional (\$51 up to \$750)		
<input type="radio"/> Surviving Spouse		<input type="checkbox"/> Tax Credit for Service-Connected Total Disability (RSA 72:35) Standard (\$700) / Optional (\$701 up to \$4,000)		
		<input type="checkbox"/> Tax Credit for Surviving Spouse (RSA 72:29-a "...of any person who was killed or died while on active duty...")		
		<input type="checkbox"/> Tax Credit for Combat Service (RSA 72:28-c) <i>If Adopted by Town</i> (\$50 up to \$500)		
		<input type="checkbox"/> Certain Disabled Veterans (Exemption) (RSA 72:36-a)		
3. Veteran's Name		Dates of Military Service Enter (MMDDYYYY)	4. Date of Entry	
			5. Date of Discharge/Release	
IF A VETERAN OF ALLIED COUNTRY: (RSA 72:32)				
6. Name of Allied Country Served in		7. Branch of Service		
9. Does any other eligible Veteran own interest in this property? YES NO If YES, provide name		8. Please Check One.		
<input type="radio"/> YES <input type="radio"/> NO		<input type="radio"/> US Citizen at time of entry into Service		
		<input type="radio"/> Alien but resident of NH at time of entry into Service		
STEP 3 EXEMPTIONS	STANDARD EXEMPTIONS			
	10. <input checked="" type="checkbox"/> 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 <u>9-6-45</u> 10b. Spouse's Date of Birth <u>11-5-49</u>			
	11. <input type="checkbox"/> Improvements to Assist Persons with Disabilities (RSA 72:37-a)			
	LOCAL OPTIONAL EXEMPTIONS (If adopted by city/town)			
	12. <input type="checkbox"/> Blind Exemption (RSA 72:37)		<input type="checkbox"/> Solar Energy Systems Exemption (RSA 72:62)	
	<input type="checkbox"/> Deaf Exemption (RSA 72:38-b)		<input type="checkbox"/> Wind-Powered Energy Systems Exemption (RSA 72:66)	
	<input type="checkbox"/> Disabled Exemption (RSA 72:37-b)		<input type="checkbox"/> Woodheating Energy Systems Exemption (RSA 72:70)	
	13. <input type="checkbox"/> NH Resident for One Year preceding April 1 in the year in which the tax credit is claimed (Veterans' Tax Credit)			
	<input type="checkbox"/> NH Resident for Five Consecutive Years (Deaf) or At least Five Years (Disabled) preceding April 1 in the year the exemption is claimed			
	<input checked="" type="checkbox"/> NH Resident for Three Consecutive Years preceding April 1 in the year the exemption is claimed (Elderly Exemption)			
STEP 4 RESIDENCY	14. Do you own 100% interest in this residence? <input type="radio"/> Yes <input type="radio"/> No If NO, what percent (%) do you own? <u> </u>			
STEP 5 OWNERSHIP				
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 <u>J. Andrew Gilmore Jr.</u>		DATE <u>2/28/2020</u>	
SIGNATURE (IN INK) OF PROPERTY OWNER <u>Marcia C. Gilmore</u>		DATE <u>2/28/2020</u>		

PROPERTY OWNER NAME

PROPERTY OWNER NAME

TAX MAP | BLOCK | LOT

2020 E65
2021 E75

**REQUIREMENTS, CONDITIONS, AND INSTRUCTIONS
OPTIONAL ADJUSTED ELDERLY EXEMPTION
FOR THE TOWN OF SEABROOK, NH**

Please fill out each area carefully. Please make certain that you sign at the end of the form in the signature area provided. All financial documents and bank statements must be included with application.

RECEIVED
FEB 26 2020
Town of Seabrook
Assessor's Office

1) Personal Information

Applicant's name(s): J. Andrew & Marcia C. Gilmore

Mailing address: 67 Fogg's Lane, Seabrook, NH 03874

Marital status: married: single: _____ Widow(er): _____

Residence owned: solely: joint tenants: _____ w/other(s) _____ Trust: _____ Life estate _____

Number of years owned residence: 3yrs. 7mo. I have been a legal resident of NH since: 7/22/2016

Date of birth: 9/6/1945 Age: 74 Spouse's date of birth: 11/5/1949 Age: 70

Do you own real estate other than your occupied NH residence? No (If yes, please attach tax bill)

2) Income Information (yearly amount from last year)

VERIFICATION OF ALL THE FOLLOWING MUST BE SUBMITTED

	Applicant	Applicant's Spouse	
a. Social Security:	\$ <u>19,326</u>	\$ <u>12,738</u>	
b. Pension & Retirement	\$ 0 <u>2499.</u> <small>State ST.</small>	\$ <u>0</u>	
c. Wages:	\$ <u>0</u>	\$ <u>0</u>	
d. Rental Income:	\$ <u>0</u>	\$ <u>0</u>	
e. Other Income:	\$ <u>FIA 580.</u> <small>Fidelity</small>	\$ _____	
f. Interest Income	\$ 0 <u>261.</u>	\$ _____	
	\$ <u>22,166.</u>	\$ <u>12,738</u>	\$ _____ <u>35,404.</u>
	Total Income	Total Income	Total of all Income

Are you required to file an interest and dividends tax return to the State of New Hampshire? No (If yes, please provide a copy of your return)

Are you required to file an IRS tax return? YES (If yes, please provide a copy of your most recent federal income tax return. If no, please sign the attached form 8821 authorizing the Town of Seabrook to contact the IRS for verification purposes.)

3. Asset Information

a. Type of property for which exemption is claimed: Single Family _____ Multi-family (CONDEX) ✓

b. If multi-family, in which unit do you reside? 67 What is the living area of your unit? 1,735

Assets:

Please list all assets owned (self & Spouse)

Savings Accounts or Investments/Certificates: (CD's, stocks, bonds, IRA's, annuities, travel trailers, RV's, boats, antiques, cars, etc.)

YOU MUST SUBMIT VERIFICATION OF THESE AMOUNTS (CURRENT STATEMENTS WITH BALANCES)

Savings Account: Institution TD Bank Preferred Savings Value \$ 25,263.30 ✓

Checking Account: Institution TD Bank Value \$ 8,405.20 ✓

IRA: 401K Andrew Institution Fidelity Investments Value \$ 49,020

CD: Institution _____ Value \$ 0

Type Savings Institution TD Bank Growth Money Market Value \$ 3,076.50 ✓

Type 401K Marcia Institution Fidelity Investments Value \$ 11,065

Estimated yard sale value of furniture, jewelry, furs, antiques, etc \$ 6,000

Vehicles:

Car make Toyota Model Rav 4 Year 2015 Mileage 50,000 Value \$ 15,200

Car make Ford Model Aerostar Year 1997 Mileage 76,000 Value \$ 2,000

Boat make _____ Model _____ Year _____ Mileage _____ Value \$ _____

RV make _____ Model _____ Year _____ Mileage _____ Value \$ _____

Real Estate: Other than your occupied NH Residence N/A

Property type _____ In town & State _____ Value \$ _____

Property type _____ In town & State _____ Value \$ _____

Total of all assets \$ 117,260.30

I swear under penalty of perjury, that all the above is 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 Seabrook Assessor's Office. I release all persons whomsoever from any liability resulting from the release of this information.

Applicant's Signature: [Signature] Spouse's Signature: [Signature] Date: 2/27/2020

Telephone number: 603-814-1252

(Office use only) Reviewed by [Signature] 2/27/2020