

**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 Huynh	FIRST NAME Sang	INITIAL Q				
	PROPERTY OWNER'S LAST NAME	FIRST NAME	INITIAL				
	MAILING ADDRESS 6 Forest Dr						
	CITY/TOWN Seabrook	STATE NH	ZIP CODE 03874				
	PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED 6 Forest Dr						
STEP 2 EXEMPTIONS/ TAX CREDITS/ DEFER- RAL	CITY/TOWN TAX MAP # 9		BLOCK # 141	LOT #			
	VETERANS' TAX CREDIT			<u>Granted/Denied</u> <u>Date</u>			
	<input checked="" type="checkbox"/>	Veterans' Tax Credit \$50 minimum (to \$500)	Amount \$ <u>750</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u> </u>	
	<input type="checkbox"/>	Service Connected Total & Permanent Disability \$700 minimum to \$2000	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>	
	<input type="checkbox"/>	Surviving Spouse/CU Partner of Veteran Who Was Killed or Who Died on Active Duty \$700 minimum (to \$2000)	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>	
	<input type="checkbox"/>	Review Discharge Papers (ei: Form DD214), Form # <u> </u>					
	<input type="checkbox"/>	Other Information <u> </u>					
	VETERANS' EXEMPTION			<u>Granted</u> <u>Denied</u> <u>Date</u>			
	<input type="checkbox"/>	Total Exemption	<input type="checkbox"/> (a) Veteran	<input type="checkbox"/> (b) Surviving Spouse/CU Partner	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>
	APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS						
Income Limits	Disabled Exemption	Elderly Exemption	Elderly Exemption Per Age Category				
Single	\$ <u> </u>	\$ <u> </u>	65 - 74 years of age	\$ <u> </u>			
Married	\$ <u> </u>	\$ <u> </u>	75 - 79 years of age	\$ <u> </u>			
Asset Limits			80 + years of age	\$ <u> </u>			
Single	\$ <u> </u>	\$ <u> </u>					
Married	\$ <u> </u>	\$ <u> </u>					
OTHER EXEMPTIONS			<u>Granted</u> <u>Denied</u> <u>Date</u>				
<input type="checkbox"/>	Elderly Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Disabled Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Improvements to Assist the Deaf	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Improvements to Assist Persons with Disabilities	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Blind Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Deaf Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Solar Energy Systems Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Woodheating Energy Systems Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
<input type="checkbox"/>	Wind-Powered Energy Systems Exemption	Amount \$ <u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u> </u>		
Elderly & Disabled Tax Deferral			<u>Granted</u> <u>Denied</u>				
<input type="checkbox"/>	Elderly and Disabled Tax Deferral	Amount \$ <u> </u>	<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 COM- MENTS/ NOTES	Municipal Comments/Notes						
STEP 4 SIGNA- TURES	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/BL/OCK/LOT

VC

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

APR 15 2020

Town of Seabrook
PA-32 on file?
YES NO

STEP 1 OWNER AND APPLICANT INFORMATION

OWNER

APPLICANT'S LAST NAME: Sang Huynh Q
APPLICANT'S FIRST NAME: Sang
MI: Q
PHONE NUMBER: []

APPLICANT'S LAST NAME: Huynh
APPLICANT'S FIRST NAME: Sang
MI: []
PHONE NUMBER: []

MAILING ADDRESS: 6 Forest Dr.
CITY/TOWN: Seabrook STATE: NH ZIPCODE: 03874
PROPERTY ADDRESS: 6 Forest Dr. TAX MAP: 9 BLOCK: 14 LOT: []

IS THIS YOUR PRIMARY RESIDENCE? YES NO

PROPERTY OWNER NAME

STEP 2 VETERANS' TAX CREDITS AND EXEMPTION

1. APPLICANT IS THE: Veteran Spouse Surviving Spouse

2. APPLYING FOR: Veterans' Tax Credit (RSA 72:28) Standard (\$50) / Optional (\$51 up to \$750)
 All Veterans' Tax Credit (RSA 72:28-b) *If Adopted by Town* Standard (\$50) / Optional (\$51 up to \$750)
 Tax Credit for Service-Connected Total Disability (RSA 72:35) Standard (\$700) / Optional (\$701 up to \$4,000)
 Tax Credit for Surviving Spouse (RSA 72:29-a) "...of any person who was killed or died while on active duty..."
 Tax Credit for Combat Service (RSA 72:28-c) *If Adopted by Town* (\$50 up to \$500)
 Certain Disabled Veterans (Exemption) (RSA 72:36-a)

3. Veteran's Name: Sang Quang Huynh
Dates of Military Service Enter (MMDDYYYY): []
4. Date of Entry: 8-31-2012
5. Date of Discharge/Release: 9-20-2013

IF A VETERAN OF ALLIED COUNTRY: (RSA 72:32)
6. Name of Allied Country Served in: Afghanistan
7. Branch of Service: Army

9. Does any other eligible Veteran own interest in this property?
YES NO If YES, provide name: []

8. Please Check One.
 US Citizen at time of entry into Service
 Alien but resident of NH at time of entry into Service

PROPERTY OWNER NAME

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)
 Electric Energy Storage Systems Exemption (RSA 72:85)

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: [Signature]
DATE: 15 April 2020

SIGNATURE (IN INK) OF PROPERTY OWNER: []
DATE: []

TAX MAP | BLOCK | LOT

2020
reg
VC

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

Name of Municipality: Seabrook NH
Name of Applicant: Sang^Q Huynh
Address of Applicant's Principal Place of Abode: 6 Forest Drive
Map and Lot Number of Applicant's Principal Place of Abode: 9-141
Date of Original Application to Municipality: 4-15-2020

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) 8-31-2012 - 9-20-2013 Name of Conflict: Fragor Freedom

Was veteran honorably discharged or separated from service? YES NO

If applicable, list any qualifying medals earned: GLOBAL WAR ON TERRORISM

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_Dischg_Papers_-_Web_0804.doc

Documentation Reviewed By: Anna Carreira Application Approved by: DA 4/17/2020

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: _____

RECEIVED

APR 15 2020

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

This Report Contains Information Subject to the Privacy Act of 1974, As Amended.

1. NAME (Last, First, Middle) HUYNH, SANG QUANG		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/ARNGUS		3. SOCIAL SECURITY NUMBER 018 80 6865	
4a. GRADE, RATE OR RANK SGT	b. PAY GRADE E05	5. DATE OF BIRTH (YYYYMMDD) 19830915	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 00000000		
7a. PLACE OF ENTRY INTO ACTIVE DUTY CAMP EDWARDS, MASSACHUSETTS		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 339 HIGH STREET RANDOLPH MASSACHUSETTS 02368			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND EN CO VERTICAL FC			b. STATION WHERE SEPARATED FORT BLISS TC, TX 79916-6816		
9. COMMAND TO WHICH TRANSFERRED 181 EN COMPANY (VERTICAL), 1030 LEE ROAD, CAMP EDWARDS, MA 02542				10. SGLI COVERAGE NONE AMOUNT: \$ 400,000.00	
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 13B20 CANNON CREWMEMBER - 1 YRS 1 MOS//12W20 CARPENTRY AND MASONRY - 1 YRS 1 MOS//NOTHING FOLLOWS		12. RECORD OF SERVICE			
		YEAR(S)		MONTH(S)	
		DAY(S)			
		a. DATE ENTERED AD THIS PERIOD		2012 08 31	
		b. SEPARATION DATE THIS PERIOD		2013 09 20	
		c. NET ACTIVE SERVICE THIS PERIOD		0001 00 20	
		d. TOTAL PRIOR ACTIVE SERVICE		0002 08 19	
		e. TOTAL PRIOR INACTIVE SERVICE		0005 08 13	
		f. FOREIGN SERVICE		0000 08 25	
		g. SEA SERVICE		0000 00 00	
		h. INITIAL ENTRY TRAINING		0000 00 00	
		i. EFFECTIVE DATE OF PAY GRADE		2012 09 21	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) IRAQ CAMPAIGN MEDAL W/ TWO CAMPAIGN STARS //NATO AFGHANISTAN SERVICE MEDAL//ARMY COMMENDATION MEDAL (4TH AWARD)//ARMY ACHIEVEMENT MEDAL//ARMY GOOD CONDUCT MEDAL //ARMY RESERVE COMPONENTS ACHIEVEMENT MEDAL //NATIONAL DEFENSE SERVICE MEDAL// AFGHANISTAN CAMPAIGN MEDAL//CONT IN BLOCK 18		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) NONE//NOTHING FOLLOWS			
15a. COMMISSIONED THROUGH SERVICE ACADEMY				YES	X NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)				YES	X NO
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Yes, years of commitment: NA)				YES	X NO
16. DAYS ACCRUED LEAVE PAID 0	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION			YES	NO
					X
18. REMARKS SERVED IN A DESIGNATED IMMINENT DANGER PAY AREA//SERVICE IN AFGHANISTAN 20121011-20130705//ITEM 12D ABOVE DOES NOT ACCOUNT FOR ANNUAL AND/OR WEEKEND TRAINING THIS SOLDIER MAY HAVE ACCOMPLISHED PRIOR TO DATE ENTERED IN ITEM 12A//INDIVIDUAL COMPLETED PERIOD FOR WHICH ORDERED TO ACTIVE DUTY FOR PURPOSE OF POST SERVICE BENEFITS AND ENTITLEMENTS//ORDERED TO ACTIVE DUTY IN SUPPORT OF OPERATION ENDURING FREEDOM IAW 10 USC 12302//MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//PDMRA LEAVE: 20130723-20130819//CONT FROM BLOCK 13: W/ TWO CAMPAIGN//SEE ATTACHED CONTINUATION SHEET The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.					
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) 339 HIGH STREET RANDOLPH MASSACHUSETTS 02368		b. NEAREST RELATIVE (Name and address - include ZIP Code) TIEN NGUYEN 339 HIGH STREET RANDOLPH MASSACHUSETTS 02368			
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) MA		OFFICE OF VETERANS AFFAIRS		X	YES NO
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)				X	YES NO
21a. MEMBER SIGNATURE ESIGNED BY: HUYNH.SANG.Q UANG.1272461356	b. DATE (YYYYMMDD) 20130712	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) ESIGNED BY: VIRAMONTES.MIREYA.A.1369530611 MIREYA VIRAMONTES, ASST TEAM LEAD		b. DATE (YYYYMMDD) 20130712	

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)			
23. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY AR 635-200, CHAP 4		26. SEPARATION CODE MBK	27. REENTRY CODE NA
28. NARRATIVE REASON FOR SEPARATION COMPLETION OF REQUIRED ACTIVE SERVICE			
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE			30. MEMBER REQUESTS COPY 4 (Initials) SQH

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ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY (Continuation Sheet)

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(Specify the item number of the block continued for each entry.) //////////////////////////////////////
 CONT FROM BLOCK 18: STARS//GLOBAL WAR ON TERRORISM SERVICE MEDAL//ARMY SERVICE RIBBON//
 OVERSEAS SERVICE RIBBON (3RD AWARD)//ARMED FORCES RESERVE MEDAL W/ M DEVICE//COMBAT
 ACTION BADGE//DRIVER AND MECHANIC BADGE W/DRIVER-WHEELED VEHICLE(S) CLASP//NOTHING
 FOLLOWS

21.a. MEMBER SIGNATURE DESIGNED BY: HUYNH.SANG.Q UANG.1272461356	b. DATE (YYYYMMDD) 20130712	22.a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) DESIGNED BY: VIRAMONTES.MIREYA.A.1369530611 MIREYA VIRAMONTES, ASST TEAM LEAD	b. DATE (YYYYMMDD) 20130712
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DD FORM 214C, AUG 2009

GENERATED BY TRANSPROC

SERVICE - 2