FORM PA-35

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION ASSESSING OFFICIALS' RESPONSE TO EXEMPTIONS/ TAX CREDITS/DEFERRAL APPLICATION NOTE: "CU PARTNER" STANDS FOR "CIVIL UNION PARTNER"

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

	terrar is claimed.						IITIAL		
STEP 1 NAME	PROPERTY OWNER Belo	R'S LAST NAME	Ana	FIRST NAME Ana					
AND	PROPERTY OWNER'S LAST NAME FIRST NAME IN						NITIAL		
ADDRES									
	MAILING ADDRESS 7 Dwight Ave								
	CITY/TOWN				STATE		PCODE		
	Seabrook	OO FOR WHICH EVENETION ORERIT	/DEEEDDAL 10	N	H (03874			
		PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED 7 Dwight Ave							
STEP 2	CITY/TOWN TAX MAP # 8 BLOCK # 102 LOT #								
EXEMP-				VETERANS' TAX CREDIT Granted/Denied Date					
TIONS/	Veterans' Ta	Veterans' Tax Credit \$50 minimum (to \$500) Amount \$							
CRED-	Service Connected Total & Permanent Disability \$700 minimum to \$2000 Amount \$								
ITS/ DEFER-	Surviving Sp	Surviving Spouse/CU Partner of Veteran Who Was Killed or Who Died on Active Duty \$700 minimum (to \$2000)							
RAL	Review Disc	Killed or Who Died on Active Duty \$700 minimum (to \$2000) Review Discharge Papers (ei: Form DD214), Form #							
	Other Inform		.,,						
				VETERANS' E	XEMPTION	Granted [Denied Date		
	Total Exem		eteran	, ` ·	ng Spouse/CU Partner				
		APPLICABLE ELDER	Y AND DIS	SABLED EXEMPTION	ON (OPTIONAL) INCOME	AND ASS	ET LIMITS		
	Income Limits	Disabled Exemption	Elder	ly Exemption	Elderly Exemp	tion Per Ag	e Category		
	Single	\$	\$	38,000	65 - 74 years of age	\$	160,000		
	Married	\$	\$	58,000	75 - 79 years of age	\$	170,000		
	Asset Limits	OF THE REAL PROPERTY.	N ENGLAND		80 + years of age	\$	200,000		
	Single	\$	\$	250,000		A FIRST	200,000		
	Married	\$	\$	250,000	*				
	Wattica	Ψ		(EMPTIONS	G	Franted De	enied Date		
	✓ Elderly Exe	emption		Amount \$			T Date		
	Disabled Exemption								
	Improvements to Assist the Deaf						`		
	1 1	Blind Exemption			Amount \$				
		Deaf Exemption			Amount \$				
		Solar Energy Systems Exemption			Amount \$ Amount \$				
		Woodheating Energy Systems Exemption Wind-Powered Energy Systems Exemption			Amount \$				
				Amount #					
	, m	Elderly & Disabled Tax Deferral Amount \$ Amount \$							
		Elderly and Disabled tax belefial							
		For Deferrals: This page must be returned to the property owner after approval or denial on or before July 1st <i>following</i> the date of Notice of Tax under RSA 72:1-d by first class mail. (RSA 72:34,IV)							
STEP 3	Municipal Comments/Notes								
COM- MENTS/									
NOTES	Colorate	(A		Cirret ef	(O-lt/A/-) !-	2-1			
STEP 4		nen/Assessor(s) Printed Name)	Signature of	Selectmen/Assessor(s) in	IIIK	Date		
SIGNA- TURES	Ella Brown, Chairman								
	Aboul B. Khan								
	Theresa Kyle								
APPEAL		for a property tax exemption							
PROCE- DURE	following the date	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 .								
OKL	Forms for appeal	ing to the BTLA may be obtain	ed from the	NH BTLA, 107 Plea	asant Street, Concord, NH	03301, the	eir web site at <u>www.</u>		

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

RECEIVED

PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS

DUE DATE APRIL 15 PRECEDING THE SETTING OF THE TAX RATE

	11AF = 4.20							
STEP 1	OWNER AND APPLICANT INFORMATION 4 2021							
OWNER	OWNER If required, is a PA-33 on file? OYES CONO.							
AND APPLICANT								
NAME	AT LIGATION OF THOME NOWINGER							
ADDRESS	Belo Ana M.							
	APPLICANT'S LAST NAME APPLICANT'S FIRST NAME PHONE NUMBER							
	MAILING ADDRESS							
	7 Dwght Ar							
	CITY/TOWN STATE ZIPCODE							
	Seabrook NH 03874							
	PROPERTY ADDRESS TAX MAP BLOCK LOT							
	7 Durght AL / 8 / 102							
	IS THIS YOUR PRIMARY RESIDENCE? YES ONO							
	VETERAN'S INFORMATION							
STEP 2	1. APPLICANT IS THE: 2. APPLYING FOR:							
VETERANS' TAX CREDITS	Veteran Veterans' Tax Credit (RSA 72:28) Standard (\$50) / Optional (\$51 up to \$750)							
AND	Spouse All Veterans' Tax Credit (RSA 72:28-b) If Adopted by Town Standard (\$50) / Optional (\$51 up to \$750)							
EXEMPTION								
	Surviving Spouse 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 Dates of Military Service 4. Date of Entry 5. Date of Discharge/Release							
	Enter (MMDDYYYY)							
	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? 8. Please Check One.							
	YES NO If YES, provide name US Citizen at time of entry into Service Alien but resident of NH at time of entry into Service							
	STANDARD EXEMPTIONS							
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)							
LALIVII HONO	(Enter numbers only MMDDYYYY) 10a. Applicant's Date of Birth 4-15-55 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 72:37-b)							
	Liberto Energy Storage Cystems Exemplion (NOVY2.00)							
STEP 4	13. NH Resident for One Year preceding April 1 in the year in which the tax credit is claimed (Veterans' Tax Credit)							
RESIDENCY	NH Resident for Five Consecutive Years (Deal) 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)							
	[2] Terresidant of time defined value procedure value procedure social and examples it is distinct (Electry Examples)							
STEP 5 OWNERSHIP	14. Do you own 100% interest in this residence? Yes No If NO, what percent (%) do you own?							
OVVINERSHIP								
STEP 6	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.							
SIGNATURES	2-00							
	SIGNATURE (IN INK) OF PROPERTY OWNER DATE							
	SIGNATURE (IN INK) OF PROPERTY OWNER DATE							

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.

1) Personal Information			FEB 23 200				
Applicant's name(s):	Ana M. Bel	0	Town of Sect				
Mailing address:	Dwight Av	re Seabrook	NH 0338 5 DATE				
Marital status: married:	single:	Widow(er):					
Residence owned: solely	: joint tenants:	w/other(s) Trust:	Life estate				
Number of years owned r	esidence: 18 years	I have been a legal resident of I	NH since: <u>2003</u>				
Date of birth: 8155	5 Age: <u>65</u> Spor	use's date of birth:	Age:				
		residence?(If yes					
2) Income Information (yearly amount from last year)							
VERIFICATION OF ALL THE FOLLOWING MUST BE SUBMITTED							
	Applicant	Applicant's Spouse					
a. Social Security:	181259	\$					
b. Pension & Retirement	\$	\$					
c. Wages:	\$	\$					
d. Rental Income:	\$	\$					
e. Other Income:	\$	**************************************	12 -1-				
f. Interest Income	s -0 516	\$ DO IRA	/ 1				
	\$ 18, 259 Total Income	\$ Total Income	18, 259. V W Total of all Income				
Are you required to file ar provide a copy of your ret		return to the State of New Hamp	oshire?(If yes, please				
The state of the s		(If yes, please provide a copy on 8821 authorizing the Town of S	•				



TEB 23 2021

3. Asset Information		2 2021			
a. Type of property for w	Town of s hich exemption is claim	eabreingle Fami	lyX Mu	lti-family	
b. If multi-family, in whic	th unit do you reside?	What	is the living area	of your unit?	-
Assets: Please list all assets owners Savings Accounts or Invecars, etc.)		:D's, stocks, bond	s, IRA's, annuities	s, travel trailers, RV's, boat	s, antiques,
YOU MUST	SUBMIT VERIFICATION C	F THESE AMOUNT	S (CURRENT STATE	MENTS WITH BALANCES)	
Savings Accour		-	te ou	Value \$ 1596-25	
Checking Accou	nt: Institution Ser	-vice FCC)	Value \$ 1006.10	
IRA:	Institution Gra	nik State	c cu	Value \$ _341 295.	92
CD:	Institution			Value \$	
Туре	Institution			Value \$	
Туре	Institution			Value \$	
Car make	Model	Year	Mileage	Value \$ 2,5 Value \$ Value \$	
				Value \$	
			willeage	value 9	
Real Estate: Other than you					
Property type	In town& State	e		alue \$	
Property type	In town& State	<u>a</u>		alue \$	
			Total of all ass	sets \$ <u>43,998.2</u> 7	
knowledge. I further authori agent of the Town of Seabro information.	ze any agency or financial ook Assessor's Office. I rele	l institution to relea	ase information abo nomsoever from an	y financial condition to the be out me or copies of my record y liability resulting from the re Date:	ds to any elease o this
Telephone number: 6	03-474-109	<u>†</u> 1 (0	ffice use only) R	Reviewed by 66.	- Valy 12021
Lī	indsay c	778-606	9236		