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:

	DEPOSED TO CHANGE	DO LACT MANE		FIRST NAME		INIT	141		
STEP 1 NAME	PROPERTY OWNER'S LAST NAME FIRST NAME INITIAL  Louf Beatrice						IAL		
AND	PROPERTY OWNER	R'S LAST NAME		FIRST NAME		INIT	IAL		
ADDRES									
	MAILING ADDRESS								
	944 Lafayette Road #34				STATE	ZIP	CODE		
	Seabrook				NH	03874			
		SS FOR WHICH EXEMPTION/CREDIT	/DEFERRAL IS	CLAIMED					
	34 B St								
STEP 2 EXEMP-	CITY/TOWN TAX MAP # 7			BLOCK# 90 LOT# 34					
TIONS/			VETERANS' TAX CREDIT <u>Granted/Denied</u> <u>Date</u>						
TAX CRED-	Veterans' Ta	ax Credit \$50 minimum (to \$50	Amount \$						
ITS/	Veterans' Tax Credit \$50 minimum (to \$500)  Service Connected Total & Permanent Disability \$700 minimum to \$2000 Amount \$  Surviving Spouse/CU Partner of Veteran Who Was  Amount \$								
DEFER-	Killed or Who Died on Active Duty \$700 minimum (to \$2000)								
RAL	Review Discharge Papers (ei: Form DD214), Form #								
	Other Information								
	VETERANS' EXEMPTION Granted Denied Date								
	Total Exemption (a) Veteran (b) Surviving Spouse/CU Partner								
		APPLICABLE ELDER	LY AND DIS	ABLED EXEMP	TION (OPTIONAL) INCOM				
	Income Limits	Disabled Exemption	Elderly	y Exemption	Elderly Exem	otion Per Age	Category		
	Single	\$	\$		65 - 74 years of age	\$			
	Married	\$	\$		75 - 79 years of age	\$			
	Asset Limits		See The St.		80 + years of age	\$			
	Single	\$	\$						
	Married	\$	s						
	Married	Ψ	EMPTIONS	THE WELLOW HIS LINE	Granted Der	ied Date			
	OTHER EXEMPTIONS         Granted         Denied         Date           Elderly Exemption         Amount \$								
	Elderly Exemption Disabled Exemption			Amount \$		H			
	Improvements to Assist the Deaf			Amount \$		H			
	Improvements to Assist Persons with Disabilities			Amount \$					
	✓ Blind Exemption			Amount \$	15,000				
	Deaf Exemption								
	Solar Energ	gy Systems Exemption							
	Woodheatir	ng Energy Systems Exemption	n						
	Wind-Powe	ered Energy Systems Exemption	on	Amount \$					
	Elderly & Disabled Tax Deferral					Granted	Denied		
	Elderly and Disabled Tax Deferral  Amount \$								
	Elderly and Disabled Tax Deferral  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)								
TEP 3	1St Tollowing th	le date of Notice of Tax under		icipal Comments					
OM- MENTS/ IOTES			iviui	ilopai Comment	5/14016-5				
TEP 4	Selectr	men/Assessor(s) Printed Name	e	Signature	e of Selectmen/Assessor(s) i	n ink	Date		
SIEP 4 SIGNA- TURES	Ella Brown, Chairman				``				
	Aboul B. Khan								
						-			
	Theresa Kyle								
PPEAL PROCE-		for a property tax exemption e of notice of tax under RSA ?							
URE	Court. Example:	If you were denied an exemple	ption from yo	our 2013 property	y taxes, you have until Septe	mber 1, 2014	l, to appeal.		
	nh.gov/btla or by	ling to the BTLA may be obtain calling (603) 271-2578. Be s	nea from the sure to specif	y EXEMPTION	-ieasani otreet, ∪oncord, Ni APPEAL.	1 USSU I, THEIR	web site at <u>www.</u>		

FORM PA-29

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS

DUE DATE APRIL 15 PRECEDING THE SETTING OF THE TAX RATE

STEP 1	OWNER AND APPLICANT INFORMATION APPLICANT	Ī						
OWNER	OWNER If required, is a PA-33 on IIIe?							
APPLICANT								
NAME AND	APPLICANT'S LAST NAME APPLICANT'S FIRST NAME MI PHONE NUMBER TOOK	١,						
ADDRESS	ADDITIONAL ACCURATE ADDITIONAL ACCURATE	1 2						
	APPLICANT'S EAST NAME MI PHONE NUMBER	£						
	MAILING ADDRESS	C						
	944 LAFAYETTE RO #34	NEX						
	CITY/TOWN STATE ZIPCODE	NAN						
	PROPERTY ADDRESS TAX MAP BLOCK LOT	l À						
	PROPERTY ADDRESS TAX MAP BLOCK LOT 7 90 34							
	IS THIS YOUR PRIMARY RESIDENCE? (DITES () NO							
	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 EXEMPTION								
EXEMPTION	Control of the country of the countr							
	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)	PROPERTY OWNER NAME						
	6. Name of Allied Country Served in 7. Branch of Service	NER						
	9. Does any other eligible Veteran own interest in this property?  8. Please Check One.							
	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							
	O O Alien but resident of NH at time of entry into Service							
	STANDARD EXEMPTIONS							
STEP 3	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)							
EXEMPTIONS	(Enter numbers only MMDDYYYY) 10a. Applicant's Date of Birth 10b. Spouse's Date of Birth	1						
	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)							
		J						
STEP 4	13. NH Resident for One Year preceding April 1 in the year in which the tax credit is claimed (Veterans' Tax Credit)	M XA						
RESIDENCY	NA 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)	SLOC						
		TAX MAP   BLOCK   LOT						
STEP 5 OWNERSHIP	14. Do you own 100% interest in this residence? OYes O No If NO, what percent (%) do you own?							
eren e	Under penalties of perjury declare that I have examined this document and to the best of my belief the information herein is true, correct							
STEP 6 SIGNATURES	and complete.							
	122/21							
	SIGNATURE (IN INK) OF PROPERTY OWNER							
	4/24	1						
	SIGNATURE (IN INK) OF PROPERTY OWNER  DATE							



APR 152021

Town of Seabrook Assessor's Office



Christine M. Brennan Deputy Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
Office of Services for Blind and Visually Impaired
21 So. Fruit Street, Suite 20
Concord, NH 03301
Tel: (603) 271-3537

Fax: (603) 271-3816

Date: April 13, 2021

To: Board of Assessors
Town of Seabrook, NH

**Property Tax Exemption for:** 

Beatrice Louf, 34 B Street, Seabrook NH 03874

This letter certifies that the above named individual has been determined by the State of New Hampshire's Registry of Legal Blindness to be legally blind as of the above date, thus meeting the requirement for the Property Tax Exemption for people who are blind\*. As required by State law, we have on record an eye report from a qualified examiner, which has been reviewed and certified by our Ophthalmologic consultant.

If your city or town participates in this exemption, this letter should be provided to your local Board of Assessors.

Sincerely,

Scott Vitting ON BEHALF OF DANIEL FRYF

Daniel B. Frye, Administrator Services for Blind and Visually Impaired

\*NH RSA V Section 72:37 allows municipalities to provide an exemption for people who are legally blind by "any amount it may determine is appropriate to address significant increases in property values".

Disability Knows No Race, Color, or National Origin – We Serve All of the Disabled Equal Opportunity Employer – Equal Educational Opportunity