

**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 Marquis (Homan)	FIRST NAME Elizabeth	INITIAL A			
	PROPERTY OWNER'S LAST NAME	FIRST NAME	INITIAL			
	MAILING ADDRESS 33A Boynton Lane					
	CITY/TOWN Seabrook	STATE NH	ZIP CODE 03874			
	PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED 33A Boynton Lane					
STEP 2 EXEMPTIONS/ TAX CREDITS/ DEFER- RAL	CITY/TOWN TAX MAP # 9		BLOCK # 10	LOT # 1		
	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"/>	(b) Surviving Spouse/CU Partner
	APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS					
Income Limits	Disabled Exemption	Elderly Exemption	Elderly Exemption Per Age Category			
Single	\$ _____	\$ 38,000	65 - 74 years of age	\$ 160,000		
Married	\$ _____	\$ 58,000	75 - 79 years of age	\$ 170,000		
Asset Limits			80 + years of age	\$ 200,000		
Single	\$ _____	\$ 250,000				
Married	\$ _____	\$ 250,000				
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"/>		
<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 COM- MENTS/ NOTES	Municipal Comments/Notes					
STEP 4 SIGNA- TURES	Selectmen/Assessor(s) Printed Name	Signature of Selectmen/Assessor(s) in ink	Date			
	Ella Brown, Chairman					
	Aboul B. Khan					
	Theresa Kyle					
APPEAL PROCE- DURE	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

APR 12 2021

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

OWNER AND APPLICANT INFORMATION

STEP 1 OWNER AND APPLICANT NAME AND ADDRESS

OWNER Elizabeth A marquis (AKA Homan) APPLICANT'S LAST NAME Elizabeth APPLICANT'S FIRST NAME A MI PHONE NUMBER 603-474-9575 MAILING ADDRESS 33A Baynton Lane CITY/TOWN Seabrook STATE NH ZIPCODE 03874 PROPERTY ADDRESS 33A Baynton Lane TAX MAP 9 BLOCK 10 LOT 10 -land IS THIS YOUR PRIMARY RESIDENCE? YES NO

PROPERTY OWNER NAME

PROPERTY OWNER NAME

TAX MAP | BLOCK | LOT

STEP 2 VETERANS' TAX CREDITS AND EXEMPTION

VETERAN'S INFORMATION 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) 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 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. US Citizen at time of entry into Service Alien but resident of NH at time of entry into Service

STEP 3 EXEMPTIONS

STANDARD 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 44-55 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)

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. Elizabeth Marquis SIGNATURE (IN INK) OF PROPERTY OWNER April 12, 2021 DATE SIGNATURE (IN INK) OF PROPERTY OWNER DATE

Eld Des

CURRENT OWNER		TOPO	UTILITIES	STRT./ROAD	LOCATION	CURRENT ASSESSMENT	
MARQUIS ELIZABETH ANN						Code	Assessed
33A BOYNTON LN						1032	41,000
SEABROOK NH 03874						1032	800
Alt Prcd ID							41,800
# Bldgs 13							
# Res Unit 1							
# Com Unit							
GIS ID 9-10-1							
Type 13							
# Bldgs 1							
# Res Unit 1							
# Com Unit							
Res Mail L NO							
Trust							
Life Estate							
Precinct M							
Assoc Pld#							

RECORD OF OWNERSHIP		BK-VOL/PAGE	SALE DATE	Q/U	VI	SALE PRICE	VC
MARQUIS ELIZABETH ANN	3663	1567	10-29-2001	U	I	0	1
MARQUIS MICHAEL P & ELIZABETH A	3444	1355	12-20-1999	U	0	0	0
MARQUIS MICHAEL P & ELIZABETH A	3145	0709	03-21-1996	U	U	6,500	0
MASSEY GREGORY J	2845	2492	07-27-1990	U	U	0	0
NICHOLS DAVID & ADELE	2575	2269	12-02-1985	Q	U	35,500	U
Total						41,800	Total

EXEMPTIONS		Amount	Description	Number	Amount	Comm Int
Total		0.00				

ASSESSING NEIGHBORHOOD		B	Tracing	Batch
Nbhd U2				
BROWN 1A				

1990 14X70 PRESTIGE
 SER # P1-01919-D
 OWNER SAYS RENTED, INTERIOR REPAIRED
 WENT OVER CARD WITH HER, GOOD COND NOW
 M/H LOCATED ON 9-10-1

BUILDING PERMIT RECORD		Amount	Insp Date	% Comp	Date Comp	Comments
Permit Id	Issue Date	Description	Amount	Insp Date	% Comp	Date Comp

LAND LINE VALUATION SECTION		Unit Price	Size Adj	Site Index	Cond.	Nbhd.	Nbhd. Adj	Notes	Location Adjustment	Adj Unit P	Land Value
B Use Code	Description	Zone	Land Type	Land Units	Unit Price	Size Adj	Site Index	Cond.	Nbhd.	Nbhd. Adj	Notes
1 1032	MANUFACT HM	RES		0 SF	0	1.00000	5	1.00	50	1.310	
Total Card Land Units		0	SF	Parcel Total Land Area		0.00	Total Land Value		0		

PREVIOUS ASSESSMENTS/HISTORY		Year	Code	Assessed	Year	Code	Assessed
Total		41,800	Total	23,600	Total	41,800	Total
		41,000	1032	2019	1032	2018	22,800
		800	1032	800	1032	800	800

VISION

2234
 SEABROOK, NH

APPRaised VALUE SUMMARY	
Appraised Bldg. Value (Card)	41,000
Appraised Xf (B) Value (Bldg)	0
Appraised Ob (B) Value (Bldg)	800
Appraised Land Value (Bldg)	0
Special Land Value	0
Total Appraised Parcel Value	41,800
Valuation Method	C

VISIT / CHANGE HISTORY					
Date	Id	Type	Is	Cd	Purpose/Result
02-25-2020	AS	02		15	Field Review
04-01-2019	AS	01	1	12	Office Change
10-10-2018	AS	01		12	Office Change
06-10-2016	JJ			15	Field Review
05-27-2015	JJ			02	Measur+2Visit
08-10-2011	JG			15	Field Review
09-03-2010	10	03		SU	STAT UPDATE

TOTAL APPRAISED PARCEL VALUE	
Total Appraised Parcel Value	41,800

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

RECEIVED

APR 12 2021

Town of Seabrook
Assessor's Office

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

Applicant's name(s): Elizabeth MARQUIS
 Mailing address: 33A Boynton Lane, Seabrook NH
 Marital status: married: _____ single: X Widow(er): _____
 Residence owned: solely: X joint tenants: _____ w/other(s) _____ Trust: _____ Life estate _____
 Number of years owned residence: 40 I have been a legal resident of NH since: 1955
 Date of birth: 10/4/55 Age: 65 Spouse's date of birth: _____ Age: _____
 Do you own real estate other than your occupied NH residence? yes (If yes, please attach tax bill)

2) Income Information (yearly amount from last year)

VERIFICATION OF ALL THE FOLLOWING MUST BE SUBMITTED

	Applicant <i>per year</i>	Applicant's spouse	<i>Applicant</i>
a. Social Security:	\$ <u>9,216.00</u>	\$ <u>710</u>	
b. Pension & Retirement	\$ <u>-0-</u>	\$ _____	
c. Wages:	\$ <u>-0-</u>	\$ _____	
d. Rental Income:	\$ <u>1,443.60</u>	\$ _____	
e. Other Income:	\$ _____	\$ _____	
f. Interest Income	\$ _____	\$ _____	
	\$ <u>13,892</u> Total Income	<u>exp - 500 -</u> Total Income	<u>13,892</u> 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 yes Multi-family _____

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

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 _____	Value \$ _____
Checking Account:	Institution <u>Citizens Bank</u>	Value \$ <u>17,977.55</u>
IRA:	Institution _____	Value \$ _____
CD:	Institution _____	Value \$ _____
Type _____	Institution _____	Value \$ _____
Type _____	Institution _____	Value \$ _____

Estimated yard sale value of furniture, jewelry, furs, antiques, etc \$ 500

Vehicles:

Car make <u>GRAN PRIX</u>	Model <u>panicate</u>	Year <u>2004</u>	Mileage <u>120,000</u>	Value \$ <u>1,000</u>
Car make _____	Model _____	Year _____	Mileage _____	Value \$ _____
Boat make _____	Model _____	Year _____	Mileage _____	Value \$ _____
RV make _____	Model _____	Year _____	Mileage _____	Value \$ _____

Real Estate: Other than your occupied NH Residence

Property type <u>Mobile Home</u>	In town& State <u>Seabrook</u>	Value \$ <u>41,800</u>
Property type _____	In town& State _____	Value \$ _____

Total of all assets \$ 43,377.55 ✓

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 o this information.

Applicant's Signature: Elizabeth Margus Spouse's Signature: _____ Date: April 12, 2011

Telephone number: 474-5075 (Office use only) Reviewed by dm6 *Robert White*