

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:

STEP 1 NAME AND ADDRESS	PROPERTY OWNER'S LAST NAME	FIRST NAME	INITIAL
	Brown	Rayann	
	PROPERTY OWNER'S LAST NAME	FIRST NAME	INITIAL
	MAILING ADDRESS		
	155 South Main St		
CITY/TOWN		STATE	ZIP CODE
Seabrook		NH	03874
PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED			
155 South Main St			

STEP 2 EXEMPTIONS/ TAX CREDITS/ DEFER- RAL	CITY/TOWN TAX MAP #	BLOCK #	LOT #	
	16	29		
	VETERANS' TAX CREDIT			Granted/Denied Date
	<input type="checkbox"/>	Veterans' Tax Credit \$50 minimum (to \$500)	Amount \$	<input type="checkbox"/>
	<input type="checkbox"/>	Service Connected Total & Permanent Disability \$700 minimum to \$2000	Amount \$	<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"/>	Review Discharge Papers (ei: Form DD214), Form #			
<input type="checkbox"/>	Other Information			

<input type="checkbox"/>	Total Exemption	<input type="checkbox"/>	(a) Veteran	<input type="checkbox"/>	(b) Surviving Spouse/CU Partner	Granted	Denied	Date
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APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS

Income Limits	Disabled Exemption	Elderly Exemption	Elderly Exemption Per Age Category	
Single	\$	\$ 44,000	65 - 74 years of age	\$ 192,000
Married	\$	\$ 67,000	75 - 79 years of age	\$ 204,000
Asset Limits			80 + years of age	\$ 240,000
Single	\$	\$ 250,000		
Married	\$	\$ 250,000		

OTHER EXEMPTIONS		Granted	Denied	Date
<input checked="" type="checkbox"/>	Elderly Exemption	Amount \$ 192,000	<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"/>	

<input type="checkbox"/>	Elderly & Disabled Tax Deferral	Amount \$	Granted	Denied
<input type="checkbox"/>	Elderly and Disabled Tax Deferral		<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 COMMENTS/ NOTES	Municipal Comments/Notes
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STEP 4 SIGNATURES	Selectmen/Assessor(s) Printed Name	Signature of Selectmen/Assessor(s) in ink	Date
	Srinivasan Ravikumar, Chairman		
	Theresa Kyle		
	Harold Eaton		

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

RECEIVED

MAY 17 2023

Eld.

Town of Seabrook Assessor's Office

OWNER AND APPLICANT INFORMATION

STEP 1
OWNER
AND
APPLICANT
NAME
AND
ADDRESS

OWNER
 [Rayann Brown] If required, is a PA-33 on file? YES NO
 APPLICANT'S LAST NAME APPLICANT'S FIRST NAME MI PHONE NUMBER
 [Brown] [Rayann] [] []
 APPLICANT'S LAST NAME APPLICANT'S FIRST NAME MI PHONE NUMBER
 [] [] [] []
 MAILING ADDRESS
 [155 South main st.]
 CITY/TOWN STATE ZIP CODE
 [Seabrook] [NH] [03874]
 PROPERTY ADDRESS TAX MAP BLOCK LOT
 [155 South main st.] [16] [29] []
 IS THIS YOUR PRIMARY RESIDENCE? YES NO

PROPERTY OWNER NAME

PROPERTY OWNER NAME

TAX MAP | BLOCK | LOT

VETERAN'S INFORMATION

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 [] Dates of Military Service Enter (MMDDYYYY) [] 4. Date of Entry [] 5. Date of Discharge/Release (if applicable) []
 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

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)
 (Enter numbers only MMDDYYYY) 10a. Applicant's Date of Birth [2-12-58] 10b. Spouse's Date of Birth []
 11. Improvements to Assist Persons with Disabilities (RSA 72:37-a)
 12. Blind Exemption (RSA 72:37)

LOCAL OPTIONAL EXEMPTIONS (if adopted by city/town)

STEP 4
RESIDENCY

13. Deaf Exemption (RSA 72:38-b) Electric Energy Storage Systems Exemption (RSA 72:85)
 Disabled Exemption (RSA 72:37-b) Wind-Powered Energy Systems Exemption (RSA 72:66)
 Solar Energy Systems Exemption (RSA 72:62) Woodheating Energy Systems Exemption (RSA 72:70)
 Renewable Generation Facilities and Electric Energy Storage Systems Exemption (RSA 72:87)
 14. 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

15. 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.
 [Rayann Brown] 5/17/23
 SIGNATURE (IN INK) OF PROPERTY OWNER DATE
 SIGNATURE (IN INK) OF PROPERTY OWNER DATE

2023
Eld

**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

APR 1 / 2023

Town of Seabrook
Assessor's Office

1) Personal Information

Applicant's name(s): Rayann Brown

Mailing address: 155 So Main St

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

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

Number of years owned residence: 39 yrs I have been a legal resident of NH since: 1958

Date of birth: 2-12-1958 Age: 65 Spouse's date of birth: _____ Age: _____

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>no SS, maybe next yr.</u>	\$ _____
b. Pension & Retirement	\$ _____	\$ _____
c. Wages:	\$ <u>27,506. Year</u>	\$ _____
d. Rental Income:	\$ _____	\$ _____
e. Other Income:	\$ _____	\$ _____
f. Interest Income	\$ _____	\$ _____
	\$ <u>27,506</u>	\$ _____
	Total Income	Total Income
		<u>27,506</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 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 Banknorth Value \$ ~~500.~~ 489.69 ✓

Checking Account: Institution _____ Value \$ _____

IRA: Institution _____ Value \$ _____

CD: Institution _____ Value \$ _____

Type _____ Institution _____ Value \$ _____

Type _____ Institution _____ Value \$ _____

Estimated yard sale value of furniture, jewelry, furs, antiques, etc \$ 2,000

Vehicles: Hyundai

Car make 2008 Model Elantra Year 2008 Mileage 140,000 Value \$ 1000.00

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 _____ In town& State _____ Value \$ _____

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

Total of all assets \$ 3490.00 ✓

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: Ryanne Brown Spouse's Signature: _____ Date: April 14, 2023

Telephone number: 603 474-5302 (Office use only) Reviewed by CC Volk