

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 Montoya		FIRST NAME Ianthe		INITIAL E	
	PROPERTY OWNER'S LAST NAME		FIRST NAME		INITIAL	
	MAILING ADDRESS 25 Pekins Ave #43					
	CITY/TOWN Seabrook		STATE NH	ZIP CODE 03874		
PROPERTY ADDRESS FOR WHICH EXEMPTION/CREDIT/DEFERRAL IS CLAIMED 43 Scott Ave						
STEP 2 EXEMPTIONS/ TAX CREDITS/ DEFER- RAL	CITY/TOWN TAX MAP # 8		BLOCK # 13		LOT # 43	
	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"/>	<input type="checkbox"/>
	<input type="checkbox"/>	Other Information _____			<input type="checkbox"/>	<input type="checkbox"/>
	VETERANS' EXEMPTION					
	<u>Granted</u> <u>Denied</u> <u>Date</u>					
<input type="checkbox"/>	Total Exemption		<input type="checkbox"/>	(a) Veteran	<input type="checkbox"/>	
<input type="checkbox"/>			<input type="checkbox"/>	(b) Surviving Spouse/CU Partner	<input type="checkbox"/>	
APPLICABLE ELDERLY AND DISABLED EXEMPTION (OPTIONAL) INCOME AND ASSET LIMITS						
Income Limits		Disabled Exemption		Elderly Exemption		
Single	\$		\$	44,000		
Married	\$		\$	67,000		
Asset Limits				Elderly Exemption Per Age Category		
Single	\$		\$	65 - 74 years of age	192,000	
Married	\$		\$	75 - 79 years of age	204,000	
				80 + years of age	240,000	
OTHER EXEMPTIONS						
<u>Granted</u> <u>Denied</u> <u>Date</u>						
<input checked="" type="checkbox"/>	Elderly Exemption		Amount \$	240,000	<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"/>	
Elderly & Disabled Tax Deferral						
<u>Granted</u> <u>Denied</u>						
<input type="checkbox"/>	Elderly and Disabled Tax Deferral		Amount \$		<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	
	Srinivasan Ravikumar, Chairman					
	Harold Eaton					
	Theresa Kyle					
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/BLCK/LOT

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Town of Seabrook
Assessor's Office

OWNER AND APPLICANT INFORMATION

STEP 1
OWNER
AND
APPLICANT
NAME
AND
ADDRESS

OWNER

If required, is a PA-33 on file? YES NO

APPLICANT'S LAST NAME: Janthe E. Montoya APPLICANT'S FIRST NAME: Janthe MI: E. PHONE NUMBER: _____

APPLICANT'S LAST NAME: Montoya APPLICANT'S FIRST NAME: _____ MI: _____ PHONE NUMBER: _____

MAILING ADDRESS: 25 Perkins Ave #43

CITY/TOWN: Seabrook STATE: NH ZIP CODE: 03874

PROPERTY ADDRESS: 43 Scott Ave TAX MAP: 8 BLOCK: 13 LOT: 43

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 "...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

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 8-27-1949 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)

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)

STEP 4
RESIDENCY

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.

Janthe E. Montoya SIGNATURE (IN INK) OF PROPERTY OWNER DATE: 4/19/24

SIGNATURE (IN INK) OF PROPERTY OWNER DATE: _____

880

**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

Applicant's name(s): Ianthe E. Montoya
 Mailing address: 43 Scott Ave. Seabrook, NH 03874
 Marital status: married: _____ single: _____ Widow(er): X
 Residence owned: solely: X joint tenants: _____ w/other(s) _____ Trust: _____ Life estate _____
 Number of years owned residence: 26 I have been a legal resident of NH since: 1949
 Date of birth: 8/27/40 Age: 83 Spouse's date of birth: N/A Age: N/A
 Do you own real estate other than your occupied NH residence? no (If yes, please attach tax bill)

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 Town of Seabrook
 Assessor's Office

2) Income Information (yearly amount from last year)

VERIFICATION OF ALL THE FOLLOWING MUST BE SUBMITTED

	Applicant	Applicant's Spouse	
a. Social Security:	\$ <u>25173</u>	\$ _____	
b. Pension & Retirement	\$ <u>10,924</u> - Symetra Life Insur. TD Bank	\$ _____	
c. Wages:	\$ <u>0</u>	\$ _____	
d. Rental Income:	\$ <u>0</u>	\$ _____	
e. Other Income:	\$ <u>IRA 418 shares</u>	\$ _____	
f. Interest Income	\$ <u>0</u>	\$ _____	
	\$ <u>36,515</u>	\$ _____	\$ <u>36,515</u>
	Total Income	Total Income	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 X Multi-family _____

b. If multi-family, in which unit do you reside? N/A 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	<u>TD bank</u>	Value \$	<u>141,328.47</u>
Checking Account:	Institution	<u>TD bank</u>	Value \$	<u>11,940.91</u>
IRA: <u>beyond savings</u>	Institution	<u>TD bank</u>	Value \$	<u>50,123.71</u>
CD:	Institution	_____	Value \$	_____
Type _____	Institution	<u>Walmart shares</u>	Value \$	<u>29,305.56.</u>
Type _____	Institution	_____	Value \$	_____

Estimated yard sale value of furniture, jewelry, furs, antiques, etc \$ 5,000.

Vehicles:

Car make	<u>Hyundai</u>	Model	<u>Santa Fe</u>	Year	<u>2016</u>	Mileage	<u>150k</u>	Value \$	<u>11-12,000</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>0</u>	In town & State	_____	Value \$	_____
Property type	<u>0</u>	In town & State	_____	Value \$	_____

Total of all assets \$ 124,698.65

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 of this information.

Applicant's Signature: [Signature] Spouse's Signature: N/A Date: 11/27/23

Telephone number: 603.474 (Office use only) Reviewed by GS.