

RECEIVED
MAR 25 2024
Town of Seabrook Assessor's Office

OWNER AND APPLICANT INFORMATION

STEP 1
OWNER
AND
APPLICANT
NAME
AND
ADDRESS

OWNER

David m. Hton Aigren

APPLICANT'S LAST NAME Aigren APPLICANT'S FIRST NAME David MI m. PHONE NUMBER

APPLICANT'S LAST NAME APPLICANT'S FIRST NAME MI PHONE NUMBER

MAILING ADDRESS

944 Lafayette Rd #57

CITY/TOWN Seabrook STATE NH ZIP CODE 03874

PROPERTY ADDRESS 57 B St. TAX MAP 7 BLOCK 90 LOT 57

IS THIS YOUR PRIMARY RESIDENCE? YES NO

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 David m. Aigren Dates of Military Service Enter (MMDDYYYY) 4. Date of Entry 3-31-1978 5. Date of Discharge/Release (if applicable) 3-7-1980

IF A VETERAN OF ALLIED COUNTRY: (RSA 72:32)

6. Name of Allied Country Served in 7. Branch of Service AIR FORCE

9. Does any other eligible Veteran own interest in this property? YES NO If YES, provide name YES NO

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 55 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 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 72:86)

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

SIGNATURE (IN INK) OF PROPERTY OWNER DATE 3-25-24

SIGNATURE (IN INK) OF PROPERTY OWNER DATE

PROPERTY OWNER NAME

PROPERTY OWNER NAME

TAX MAP | BLOCK | LOT

all
VC

VETERANS' CREDIT QUALIFICATIONS WORKSHEET
In Satisfaction of RSA 21-J:11-a Assessment Review Report
Conducted Every Five Years

Name of Municipality: SEABROOK

Name of Applicant: David M. AIGren

Address of Applicant's Principal Place of Abode 57 B St.

Map and Lot Number of Applicant's Principal Place of Abode: 7-90-57

Date of Original Application to Municipality: 3-25-24

Regular Veterans' Tax Credit (RSA 72:28)

Date Range of Active Duty From DD214 or other qualifying discharge papers;
(90 days must be within this range) 3-31-78 - 3-7-1980

Was veteran honorably discharged or separated from service? YES NO

If applicable, list any qualifying medals earned: _____

For a list of qualifying medals go to: http://www.nh.gov/revenue/property_tax/veterans_medals_list.doc

For a list of qualifying discharge papers go to:
http://www.nh.gov/revenue/property_tax/Veterans_Qualifying_Dischg_Papers_-_Web_0804.doc

Documentation Reviewed By: Samana Camier Application Approved by: BOS

Service Connected Total and Permanent Disability (RSA 72:35)

The municipality has seen a copy of the letter provided by the United States Department of Veterans' Affairs certifying that the applicant is rated totally and permanently disabled from service connection and has approved or denied this application accordingly.

Documentation Reviewed By: _____ Application Approved by: _____

Surviving Spouse of Veteran Who was Killed or Who Died While on Active Duty (RSA 72:29-a) or, Certain Disabled Veterans (RSA 72:36-a)¹

For 72:29-a: The municipality has seen a copy of the DD214 discharge papers or a copy of the DD Form 1300, Report of Casualty, or other qualifying discharge papers of the veteran's spouse and has determined that the veteran, in this case, died or was killed while on active duty in the armed forces of the United States of America in the wars, conflicts or armed conflicts, or combat zones set forth in RSA 72:28 and has approved or denied this application accordingly.

For 72:36-a: The municipality has seen a letter from the VA certifying that the veteran did receive assistance from the VA in acquiring his residential real estate.

Documentation Reviewed By: _____ Application Approved By: _____

¹ Revised September, 2006
veteransworksheetsWInst

DD FORM 1 JUL 79 214

PREVIOUS EDITIONS OF THIS
FORM ARE OBSOLETE.

**CERTIFICATE OF RELEASE OR DISCHARGE
FROM ACTIVE DUTY**

1. NAME (Last, first, middle) ALGREN DAVID MILTON		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE BCG AF		3. SOCIAL SECURITY NO. 006 60 8227	
4a. GRADE, RATE OR RANK AMN	4b. PAY GRADE E-2	5. DATE OF BIRTH 1958 MAR 30	6. PLACE OF ENTRY INTO ACTIVE DUTY NEW HAVEN, CT		
7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 317 CES (MAC)			8. STATION WHERE SEPARATED POPE AFB, NC 28308		
9. COMMAND TO WHICH TRANSFERRED NA			10. SGLI COVERAGE AMOUNT \$ 20 000 <input type="checkbox"/> NON		
11. PRIMARY SPECIALTY NUMBER, TITLE AND YEARS AND MONTHS IN SPECIALTY (Additional specialty numbers and titles involving periods of one or more years) 57150, FIRE PROTECTION SPECIALIST, 1 YEAR 11 MONTHS		12. RECORD OF SERVICE			
		a. Date Entered AD This Period	1978	MAR	31
		b. Separation Date This Period	1980	MAR	07
		c. Net Active Service This Period	01	11	07
		d. Total Prior Active Service	00	00	00
		e. Total Prior Inactive Service	00	04	21
		f. Foreign Service	00	00	00
		g. Sea Service	NA	NA	NA
		h. Effective Date of Pay Grade	1979	MAR	30
		i. Reserve Oblig. Term. Date	NA	NA	NA
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) NONE					
14. MILITARY EDUCATION (Course Title, number weeks, and month and year completed) FIRE PROTECTION SPECIALIST COURSE, 274 HOURS, JUL 77					
15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. HIGH SCHOOL GRADUATE OR EQUIVALENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		17. DAYS ACCRUED LEAVE PAID 18.5	
18. REMARKS COPY 3; VA DATA PROCESSING CENTER, AUSTIN, TX 78772 COPY 5; UISDC, P.O. BOX 44246 CAPITOL STATION, BATON ROUGE, LA 70804 COPY 6; VETERANS HOME AND HOSPITAL, 287 WEST STREET, ROCKY HILL, CT 06067 -----NOTHING FOLLOWS-----					
19. MAILING ADDRESS AFTER SEPARATION ROUTE #4 BOX 339A SPRING LAKE, NC 28390			20. MEMBER REQUESTS COPY 6 BE SENT TO <u>CT</u> DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
21. SIGNATURE OF MEMBER BEING SEPARATED <i>David Milton Algren</i>		22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN NELSON W. TAYLOR IV, 2LT, USAF, CH, QUALITY FORCE <i>Nelson W. Taylor IV</i>			

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION DISCHARGE		24. CHARACTER OF SERVICE (Includes upgrades) HONORABLE	
25. SEPARATION AUTHORITY AFR 39-10	26. SEPARATION CODE JEM	27. REENLISTMENT CODE 2P	
28. NARRATIVE REASON FOR SEPARATION MARGINAL PERFORMER -- ASSIGNED TO ORGANIZATIONAL UNIT		30. MEMBER REQUESTS COPY 4 INITIALS	
29. DATES OF TIME LOST DURING THIS PERIOD NONE			