**PLEASE PRINT OR TYPE OFFICE OF THE ASSESSOR \_\_\_\_\_\_GRAND LIST**

**Rev 09/17 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

#### APPLICATION FOR GOLD STAR EXEMPTION

## FILE BIENNIALLY

## FILING PERIOD FEB. 1 – OCT. 1

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| --- | --- | --- | --- |
| **1. NAME (Last) (First) (Middle Initial)** | | **YOUR SOCIAL SECURITY NO.**  **- -** | |
| **2. SPOUSES NAME (Last) (First) (Middle Initial)** | | **SPOUSES SOCIAL SECURITY NO.**  **- -** | |
| **3. PROPERTY LOCATION (No. and Street) CITY OR TOWN STATE ZIP CODE** | | | |
| **4. MAILING ADDRESS (If different from above)** | | **TELEPHONE NO.** | |
| **5. AFFIDAVIT RECORDED WITH CITY CLERK VOLUME: \_\_\_\_\_\_\_\_\_\_\_ PAGE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_. SURVIVING SPOUSE PARENT(S)** | | | |
| **6. MARITAL STATUS : MARRIED UNMARRIED (Single, Divorced, Widow/Widower, or Legally Separated)** | | | |
| **7. QUALIFYING INCOME (INCOME FROM ALL SOURCES FOR LAST CALENDAR YEAR):**   1. **GROSS INCOME – Examples: Wages, Bonuses, Commissions, Fees, Gratuities, Payment for Jury Duty**   **(excluding travel allowance), Lottery winnings, Taxable portion of Annuities and Pensions (including**  **Veteran’s), Taxable portion of IRA’s, Interest, Dividends, Net rent or proceeds from sales of property, etc.**  **If you are required to file a Federal Income Tax Return, enter the amount of Adjusted Gross Income**  **Plus any other income and attach a copy of the return to this application. a. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_**   1. **NON-TAXABLE INTEREST - Example: Interest from Tax Exempt Government Bonds b. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_** 2. **SOCIAL SECURITY OR RAILROAD RETIREMENT INCOME – (GROSS AMOUNT) c. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_** 3. **ANY INCOME NOT REFLECTED IN THE ABOVE - Examples: Federal Supplemental Security Income,**   **State of Connecticut public assistance payments, General Assistance, Veteran's Pensions, and any other**  **income not listed above. d. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_**  **e. TOTAL Add lines 7a through 7d e. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.\_\_\_\_** | | | |
| **8.**  **APPLICANT'S**  **AFFIDAVIT** | **The Applicant herein claims a property tax exemption under provisions of the General Statutes, deposes that the above statements are true and complete and that he/she is not receiving a State exemption in accordance with Section 12-81f or 12-81g in any other town or city. The signature below indicates that this affidavit has been read and understood.** | | |
| **SIGNATURE OF APPLICANT**  **X** | | | **Date signed (Mo, Day, Yr)**  **\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_** |

**STOP ! DO NOT WRITE BELOW THIS LINE - FOR ASSESSOR'S USE ONLY**

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| **9. IS THE APPLICANT ELIGIBLE TO RECEIVE SURVIVING SPOUSE VETERAN’S EXEMPTION (“A” Code): YES NO Amount $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | |
| **10. EXEMPTION APPLIED TO: Real Estate Motor Vehicle Personal Property Supplemental Motor Vehicles** | | | | | | | | | |
| **REAL ESTATE UNIQUE ID** | | | **ASSESSMENT** | | **PERSONAL PROPERTY: ACCOUNT** | | | **ASSESSMENT** | |
| **Vehicle Registration** | | **Make** | | **Model** | | **VIN** | | | **Assessment** |
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| **11. TOTAL ASSESSMENT $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EXEMPTION GREATER OF: 10% ASSESSED $20,000 TOTAL EXEMPTION $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | |
| **12.**  **ASSESSOR'S**  **AFFIDAVIT** | \_\_ **-** I am satisfied that the above named applicant meets all the necessary statutory requirements  \_\_ **-** This claim is disallowed for the following reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| **SIGNATURE OF ASSESSOR OR MEMBER OF ASSESSOR'S STAFF** | | | | | | | **Date signed (Mo.,Day,Yr.)**    **\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_** | | |