

APPLICATION FOR LOCAL OPTION ELDERLY TAX RELIEF TOWN OF GREENWICH

Complete and return all forms during the filing period: February 1, 2007 thru May 15, 2007

PARCEL ID NUMBER: _____ TELEPHONE: _____

NAME: _____ BIRTH DATE: ____/____/____

NAME: _____ BIRTH DATE: ____/____/____

PROPERTY ADDRESS: _____

- | | | | |
|-----------|--|-----|----|
| 1. | Applicant is a resident of the Town of Greenwich at time of application. | YES | NO |
| 2. | Applicant has been a taxpayer of the Town for at least one (1) year immediately preceding the receipt of tax relief under this Ordinance. How many total years? _____. | YES | NO |
| 3. | Applicant occupied property as PRINCIPAL RESIDENCE, for more than 183 days (6 months) during the twelve months immediately prior to the filing of this application. | YES | NO |
| 4. | Applicant's Percent Ownership is 100%? If NO, what percent _____%. | YES | NO |
| 5. | Applicant is 65 years of age or over as of 12/31/2006, OR is 60 years of age as of 12/31/2006 and is the Surviving spouse of a taxpayer qualified for tax relief at the time of his/her death.
Proof of age required for new Applicants. | YES | NO |
| 6. | Does applicant or his/her spouse owe taxes or sewer charges to the Town in the fiscal year immediately preceding the fiscal year for which the credit is applied? | YES | NO |
| 7. | Applicant has applied for State tax relief under State of Connecticut Statutes. If NO, please state reason _____. | YES | NO |
| 8. | If Co-op owner, # of shares owned _____. Total shares issued _____. Documentation is required. What percent of the property is rented to others? _____%. Is the property for sale? | YES | NO |

- Attach a copy of the signed **2006 IRS Form 1040**, 1040A, or 1040EZ.
- If **no IRS filing is required**, complete, sign and return the enclosed **Affidavit**.
- Attach copies of all other income sources, including **2006 1099 Social Security Statement, interest, annuities, retirement plans, dividends, and any Non-taxable income, etc.**
- See Revised ORDINANCE for specifics. The Revised ORDINANCE does not allow Elderly Tax Relief on properties with an assessment exceeding **\$1,474,100** on the 2006 Grand List.
- Combined credits/exemptions cannot exceed 75% of taxes due.

SWORN AFFIDAVIT: The above named applicant, or authorized agent, pledges and affirms that the above statements are true and complete and claims tax relief under provisions of the Town of Greenwich Tax Relief of the Elderly Ordinance. APPLICATIONS ARE SUBJECT TO AUDIT.

SIGNATURE: _____ DATE: _____ STAFF: _____

FOR OFFICE USE ONLY

I:		A:	
SS:		EX:	
T:		S:	

MF	HOLD
SF	DONE