

PERSONS AT LEAST 60 YEARS OF AGE
FOR WHOM HOUSING IS PROVIDED

Clause 50
G.L. Chap. 59, Sec.5

Fiscal Year 20

THE COMMONWEALTH OF MASSACHUSETTS

Do not write in this space
Date Application received:

.....
NAME OF CITY OR TOWN

APPLICATION FOR STATUTORY EXEMPTION
Must be filed with the Board of Assessors on or before October 1

Name of record owner(s) _____ Tax Bill No. _____

Name of applicant _____

Location of real estate
Upon which exemption is claimed _____

Is this property owned and occupied by you as your domicile? _____

Type of property before improvements made (check applicable unit)

Single family house _____

Two family house _____

Three family house _____

Name of person for whom
housing is provided _____ Date of Birth _____

Was this person residing on the property on July first?

I _____ herby certify that the alterations and improvements
(Name of applicant)
made to the property described above were made for the purpose of providing housing for a person at least 60 years of age.

Subscribed this day _____ of _____ 20____ under penalties of perjury.

Signature of Applicant _____

Post Office Address _____

The filing of this application does not stay the collection of the tax.

FOR ASSESSORS' RECORDS

Notice
Sent _____ for hearing _____ Hearing
DATE DATE held _____ with _____
DATE DATE NAME

EXEMPTION DISALLOWED _____

EXEMPTION ALLOWED \$ _____ on Tax of \$ _____

_____ } Board of Assessors
of _____

DATE _____ 20 _____

Abatement
Certificate
No. _____

Elderly housing
G.L. Ch. 59, S.5

FISCAL YEAR
20 _____

APPLICANT

ADDRESS

LOCATION OF PROPERTY

NAME OF CITY OR TOWN

WARD _____ LINE _____

PRECINCT _____ PAGE _____

ACCOUNT NUMBER _____

THE COMMONWEALTH OF MASSACHUSETTS

**ELDERLY APPLICANT
APPLICATION FOR
STATUTORY EXEMPTION
FROM REAL ESTATE TAX**

Chapter 59, Section 5
Clause 50