# LYME'S TOTALLY AND PERMANENTLY DISABLED TAX EXEMPTION QUALIFICATIONS

- 1. The applicant must have been a NH resident for five years prior to April 1.
- 2. The applicant must have owned the Lyme resident by April 1<sup>st</sup>, individually or jointly, or if the residence is owned by a spouse, they must have been married for at least five years.
- 3. Is the applicant eligible under Title II or Title XVI of federal Social Security Act for benefits to the disabled?
- 4. The applicant must have a net income of not more than \$30,000 or, if married, a combined net income of less than \$40,000.
- 5. Net income is to be determined by deducting from all monies received from any source whatsover, the amount of any of the following, or the sum thereof:
  - a. Life insurance paid on the death of an insured.
  - b. Expenses and costs incurred with conducting a business enterprise.
  - c. Proceeds from the sale of assets.

d

- 6. The applicant may not have assets in excess of \$150,000, excluding the value of the dwelling but including the value of any land that is in-excess of the minimum lot size required in applicants zoning district.
- 7. The applicant, meeting the above statute requirements, will receive the following exemption:

\$135,000 Valuation Reduction

8. If your income or asset level changes and you no longer qualify for exemption, you are obligated by law to advise the Board of Selectmen (Lyme's Assessing Department).

# WORK SHEET TO DETERMING TXCESS LAND VALUE FOR ELDERLY, DISABLED C... DEAF EXEMPTION

Lot:

Map:

Property Owner Name:\_

District Minimum Acreage Requirements:	The second of th
	The applicant can not have assets in excess of \$150,000
Rural District: 3 AC if on State Road	EXCLUDING The value of the dwelling but INCLUDING the
Rural District: 5 AC if on Town Road	Value of any land that is in excess of the minimum lot size
Lyme Common District: 1 Acre	required in the applicants zoning district.
Lyme Center District: 1 Acre	THE CONTROL OF THE CO
Commercial District: 2 Acres	
East Lyme District: 15 Acres	
Mountain-Forest District: 50 Acres	
This Parcel has acres and is located in the	District with aacre minimum lot size.
Number of Minimum Lot Size Acres to be Excluded:	Number of Excess (Asset) Acres to be Included:
1. Appraised Value for excluded 1st Acre \$	(Land Value from first land line on PRC)
2. Appraised Value for excluded Acres \$	(Land Value = Adjusted Unit Price (second land line on prc) X
	the zoning district minimum required lot size, less one.)
Total Excluded Land Value \$	(Value 1 + Value 2)

To Determine the land value that will be Included as an asset:

Excess (Asset) Acreage=(# of Acres above Zoning District Minimum) X (Adjust Unit Price per Acre from the second land line on the PRC)

(Transfer this amount to Asset Worksheet) Total Included as excess (Asset) acres Acres x \$ Excess (Asset) Acreage =

Retain this worksheet with the PA-29

Aug-11

1-Shared\XL-Data\Exemptions-Abatements\Exemptions\Income and Assest Worksheets\Excess Land.xlsx

# Town c me Disabled Exemption Verification Sheet

Name of Owner(S)		
Property Location		
MapLot		
EXEMPTION FOR THE DISABLED NH RSA 72:37-b \$135, 000 Valuation Reduction		
1 Has the applicant lived in New Hampshire, consecutively, for at least the past 5 years?	YES	NO
2 Is the annipant listed as an owner or has been married to the owner for 5 years?	YES	NO
3. If the applicant is a beneficiary of a trust or has a life estate has the PA-33 ben completed?	YES	N/A
4.1s the applicant eligible under Title II or Title XVI of federal Social Security Act for benefits to disabled?	YES	ON
5. Has proof of Residency been provided (please list the documented used for ownership verification)?	YES	Document:
6 Is the combined Income level from the worksheet below \$30,000 if single or \$40,000 if Married?	YES	ON
7. Is the total asset level from the worksheet less than \$150,000?	YES	ON
8. Does the applicant meet all criteria?	YES	NO
9. Is the PA-29 Completed and signed?	YES	NO
10. What date did the Select board act on the Disabled Exemption Application?	Date:	Granted or Denied
11. In which Tax Year will the Disabled Exemption first be applied?	Date:	
I,	plicant meets all re	quirements.
Signature:		
Date:		

FORM PA-29

### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

### PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS

DUE DATE APRIL 15th PRECEDING THE SETTING OF THE TAX RATE CALL YOUR CITY/TOWN FOR INCOME AND ASSET LIMITS

There is a separate page of instructions (pages 3 & 4) that accompany this form. If you do not receive the instructions, please visit our web site at <a href="https://www.nh.gov/revenue">www.nh.gov/revenue</a> or contact your city/town.

STEP 1	PROPERTY OWNER'S LAST NAME	FIRST NAME	INITIAL			
NAME AND	PROPERTY OWNER'S LAST NAME	FIRST NAME	INITIAL			
ADDRESS	MAILING ADDRESS					
	MAILING ADDRESS					
	CITY/TOWN	STATE	ZIP CODE			
	CITY/TOWN TAX MAP #	BLOCK#	LOT#			
	ADDRESS OF PROPERTY					
STEP 2 VETERANS'						
TAX CRED-	2 Date of Entry into Military Service	3 Date of Discharge/Release from Milita	ry Service			
EMPTION	4 Veteran	Veterans' Tax Credit				
	Spouse	Credit for Service Connected Total and Permanent Disability				
	Surviving Spouse	Credit for Surviving Spouse of Veteran Who Was Killed or D	ried on Active Duty			
	Veteran of Allied Country					
	5 Name of Allied Country Served in _					
	7 US Citizen at time of entry into	the Service 8 Alien but Resident of NH at time	of entry into the Service			
	9 Does any other eligible Veteran own	interest in this property? No Yes If YES, give name	ne			
6	10 Total Veteran Exemption	(a) Veteran (b) Surviving Spouse of	that Veteran			
STEP 3 OTHER	11 Elderly Exemption Applicant' Must be 65 years of age on or I	s Date of Birth Spouse's Date of Birth perfore April 1st of year for which exemption is claimed.				
EXEMP- TIONS	12 Disabled Exemption	Solar Energy Systems Exem	ption			
	Blind Exemption	Woodheating Energy System	ms Exemption			
	Deaf Exemption	Wind-Powered Energy Syst	ems Exemption			
STEP 4 IMPROVE- MENTS	13 Improvements to Assist Person	s with Disabilities Improvements to Assist the I	Deaf			
STEP 5	14 This is my primary residence					
RESIDEN- CY		eding April 1st in the year in which the tax credit is claimed (Ve	1 (			
17000	NH Resident for Five Consecutive Years preceding April 1st in the year the exemption is claimed (Disabled & Deaf Exemptions)					
OTED 6	NH Resident for Three Consec	utive Years preceding April 1st in the year the exemption is cl	aimed (Elderly Exemption)			
STEP 6 OWNER- SHIP	15 Do you own 100% interest in this residence? Yes No If NO, what percent (%) do you own?					
STEP 7 SIGNA-	Under penalties of perjury, I hereby declare that the above statements are true.					
TURES	SIGNATURE (IN INK) OF PROPERTY OWNER		DATE			
	SIGNATURE (INTIMA) OF THOSE ENTROMER		DATE			
	SIGNATURE (IN INK) OF PROPERTY OWNER		DATE			
WHEN TO FILE	<b>Deadline:</b> Form PA-29 must be filed by April 15th <i>preceding</i> the setting of the tax rate. The assessing officials shall send written notice to the taxpayer of their decision by July 1st <i>prior</i> to the date of notice of tax. Failure of the assessing officials to respond shall constitute a denial of the application. Example: If you are applying for an exemption and/or credit off your 2013 property taxes, which are due no earlier then December 1, 2013, then you have until April 15th, 2014 to file this form. The assessing officials have until July 1st, to send notice of their decision. Failure of the assessing officials to respond shall constitute a denial of the application.					
	Date of filing is when the completed applied by an overnight delivery service.	cation form is either hand delivered to the city/town, postmarked	by the post office, or receipted			
APPEAL PROCE- DURE	If an application for a property tax exemption or tax credit is denied by the town/city, 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 <a href="https://www.nh.gov/btla">www.nh.gov/btla</a> or by calling (603) 271-2578. Be sure to specify <b>EXEMPTION APPEAL</b> .					



### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

### PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS

Web site for the Veterans' qualifying medals and discharge papers: www.nh.gov/revenue munc\_prop/propertyappraisal.htm then click on either Veterans Medals List or Veterans Qualifying Discharge Papers.

TYPE OF CREDIT OR EXEMPTION	AMOUNT	WHO MAY APPLY			
STANDARD TAX CREDIT RSA 72:28	\$50 (\$51-\$500 if RSA 72:28-a is adopted) is subtracted from the taxes due on the applicant's RESIDENTIAL property occupied as veteran's principle place of abode. For Veteran's surviving spouse: See RSA 72:28 II. For Proration: See RSA 72:30.	Every resident in the U.S. who served not less than 90 days in the armed forces in any of the qualifying wars or armed conflicts, as listed in RSA 72:28, and was honorably discharged; or the spouse or surviving spouse of such resident.  • 'Under Honorable Conditions' does not qualify.			
SURVIVING SPOUSE TAX CREDIT RSA 72:29-a	\$700 (\$701-\$2000 if RSA 72:29-b is adopted) is subtracted from taxes due on the applicant's property, whether residential or not.	The surviving spouse of any person who was killed or died while on active duty in the armed forces, as listed in RSA 72:28, so long as the surviving spouse remains single.			
SERVICE- CONNECTED TOTAL DISABILITY TAX CREDIT RSA 72:35	\$700 (\$701-\$2000 if RSA 72:35-a is adopted) is subtracted from the property taxes due on the applicant's residential property.	<ul> <li>Any person who:</li> <li>has been honorably discharged and who has a total and permanent service-connected disability; OR</li> <li>is a double amputee or paraplegic because of the service-connected injury; OR</li> <li>is the surviving spouse of above qualified veteran and remains single.</li> </ul>			
EXEMPTION FOR CERTAIN DIS- ABLED SERVICE- MEN RSA 72:36-a	"shall be exempt from all taxation on said homestead"	<ul> <li>Any person, who:         <ul> <li>is discharged from the military services of the U.S. under conditions other than dishonorable, or an officer who is honorably separated from military service; AND</li> </ul> </li> <li>is totally and permanently disabled from service connection and satisfactory proof of such service connection is furnished to the assessors; AND</li> <li>is a double amputee of the upper or lower extremities or any combination thereof, paraplegic, or has blindness of both eyes with visual acuity of 5/200 or less as the result of service connection; AND</li> <li>owns a specially adapted homestead which has been acquired with the assistance of the Veterans Administration or owns a specially adapted homestead which has been acquired using proceeds from the sale of any previous homestead which was acquired with the assistance of the Veterans Administration.</li> </ul>			

EXEMPTION	AMOUNT OF EXEMPTION	WHO MAY APPLY
IMPROVEMENTS TO ASSIST PERSONS WITH DISABILITIES RSA 72:37-a and RSA 72:38-b	The value of improvements made for the purpose of assisting a person with a disability or deafness is deducted from the assessed value of the residential real estate.	Any person owning residential real estate upon which he resides and to which he has made improvements for the purpose of assisting a person with a disability or deafness who also resides on such real estate.

### THE OPTIONAL EXEMPTIONS BELOW MUST BE ADOPTED BY THE MUNICIPALITY BEFORE ANYONE MAY APPLY

EXEMPTION AMOUNT OF EXEMPTION		WHO MAY APPLY			
DISABLED RSA 72:37-b RSA 72:37-c	Amount of the exemption, and the level of income and assets (excluding the value of the property owner's residence) are determined by vote of the city/town, per RSA 72:37-c.	Any person eligible under the Federal Social Security Act for benefits to the disabled, and who has been a New Hampshire resident at least 5 years by April 1st of the year the exemption is claimed.  NOTE: See Financial Qualifications on page 3.			
BLIND EXEMPTION RSA 72:37	\$15,000 (unless the city/town votes an increase) is subtracted from the assessed valuation.	Every inhabitant owning residential real estate, who is legally blind, as determined by the administrator of blind services of the vocational rehabilitation division of the education department.			
DEAF EXEMPTION RSA 72:38-b	\$15,000 (unless the city/town votes an increase) is subtracted from the assessed valuation.	NH Residents who are deaf or severely hearing impaired and have been a NH resident for more than 5 consecutive years and meet the income and asset requirements.			
SOLAR ENERGY SYSTEMS RSA 72:61	Determined by vote of the city/town, per RSA 72:63.	Any person owning real property equipped with a solar energy heating or cooling system, as defined in RSA 72:61.			
WOODHEATING EN- ERGY SYSTEMS RSA 72:69	Determined by vote of the city/town, per RSA 72:71.	Any person owning real property equipped with a woodheating energy system, as defined by RSA 72:69.			
WIND-POWERED Determined by vote of the city/town, per RSA 72:67.		Any person owning real property equipped with a wind-powered energy system as defined by RSA 72:65.			

PA-29 Instructions Rev. 3/2013 PA-29 Instructions

**TURES** 

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

### PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS

**GENERAL INSTRUCTIONS** 

File with your city/town of primary residency by April 15th preceding the setting of the tax rate. WHERE TO FILE Applicant must be qualified as of April 1st of the year the exemption and/or tax credit is claimed. Financial qualifications required for WHO MAY certain exemptions must be met by the time of application. An applicant must have resided in this state for at least one year preceding FILE April 1st, in the year in which the veterans' tax credit is claimed. An applicant must have resided in this state for a least three years preceding April 1st in the year for which the elderly exemption is claimed and five years in which the deaf or disabled exemption is claimed. The terms owner, own or owned, shall include those persons who hold equitable title or the beneficial interest for life in the property. CREDITS Tax credits approved will be deducted from their property tax amount. EXEMP-Tax exemptions approved are deducted from the amount of the property owner's total assessed value prior to the calculation of tax due. **TIONS** Applicant must have resided in this state for at least 3 consecutive years preceding April 1st in the year which the exemption is claimed. **ELDERLY** Property must be: owned by a resident; or owned by a resident jointly or in common with the resident's spouse, either of whom meets the EXEMPage requirement for the exemption claimed; or owned by a resident jointly or in common with a person not the resident's spouse, if the TIONS resident meets the applicable age requirement for the exemption claimed; or owned by a resident, or the resident's spouse, either of whom RSA 72:39-a meets the age requirement for the exemption claimed, and when they have been married for at least 5 years. RSA Property cannot have been transferred to the applicant, from a person under the age of 65, and related to the applicant by blood or mar-72:33-b riage, within the preceding five years. Property must meet the definition of residential real estate, per RSA 79:39-a(c), which includes the housing unit, which is the person's principal home and related structures such as a detached garage or woodshed. It does not include attached dwelling units and unattached structures used or intended for commercial or other non-residential purposes. If fractional interest is owned, see RSA 72:41, Proration. ELDERLY. INCOME Includes Excludes DEAF & Life insurance paid on the death of an insured; LIMITATION Income from any source DISABLED Expenses and costs incurred in the course of conducting a business enterprise; including Social Security or FINANCIAL Proceeds from the sale of assets. pension. QUALIFICA-ASSET LIMI-Includes Excludes TIONS The value of the person's actual residence and the land upon which it is located up to TATION The value of all assets. RSA 72:39-a the greater of 2 acres or the minimum single family residential lot size specified in the tangible and intangible. RSA 72:38-b local zoning ordinance. RSA 72:37-b The value of any good faith encumbrances. Individuals who need auxiliary aids for effective communications in programs and services of the New Hampshire Department of Rev-ADA enue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call COMPLIANT TDD Access: Relay NH 1-800-735-2964. LINE-BY-LINE INSTRUCTIONS Type or print the property owner(s) name and address in the spaces provided. Also, enter the Tax Map, Block, Lot numbers and the STEP 1 NAME & property (Location) address for which the credit or exemption applies. **ADDRESS** STEP 2 Line 1 Enter the Name of the Veteran. VETERAN'S Line 2 Enter the date of entry into military service. TAX CRED-Line 3 Enter the date of discharge or release from military service. IT/ EXEMP-Check the box or boxes that apply to indicate whether you are a veteran, veteran's spouse or surviving spouse Line 4 TION of a veteran and what type of credit(s) you are applying for. Line 5 Enter the name of the Allied Country in which you served, if applicable. Enter the Branch of Service that you served in. Line 6 Check the box if you were a US citizen at the time of entry into the service. Line 7 Check the box if you were an alien but a resident of NH at the time of entry into the service. Line 8 Check the appropriate box to indicate if another veteran owns an interest in this property. If yes, provide name. Line 9 Check the appropriate box(es) to indicate whether you are applying for a total veteran's exemption. Line 10 If an elderly exemption is requested, check that box and enter the applicant's date of birth. And if appropriate, enter the STEP 3 Line 11 OTHER EXEMP spouse's date of birth. Check the appropriate box or boxes to indicate the exemption(s) you are applying for. Line 12 TIONS STEP 4 Check the box if your property has improvements to assist persons with disabilities or to assist the deaf. Line 13 IMPROVE-**MENTS** Check the box or boxes to indicate that you meet the minimum resident time requirements listed. STEP 5 NOTE: The surviving spouse tax credit under 72:28 III and 72:29-a may be applied on any property in the same municipality where the RESIDENCY applicant is a resident. STEP 6 Check the box indicating whether or not you own 100% of the property. If no, give the percentage that you do own. **OWNERSHIP** STEP 7 All property owners must sign in ink. Attach additional pages with owners signatures if there are more than two owners of record. SIGNA-

FORM PA-29

### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

## PERMANENT APPLICATION FOR PROPERTY TAX CREDIT/EXEMPTIONS TO BE COMPLETED BY CITY/TOWN ASSESSING OFFICIALS

### MUNICIPAL AUTHORIZATION

VETERANS' TAX CREDIT							
CITY/TOWN TAX MAP # BLOCK # LOT #				Granted	Denied	<u>Date</u>	
Veterans' Tax Credit (\$50 minimum to \$500)  Amount \$							
Service Connected Total & Permanent Disability (\$700 minimum to \$2000) Amount \$							
Surviving Spouse of Veteran Who Was Killed or Who Died on Active Duty (\$700 minimum to \$2000)							
Review Discharge Papers (Form DD214), Form #							
Other Information							
VETERANS' EXEMPTION Granted Denied					Date		
Total Exemption (a) Veteran (b) Surviving Spouse							
	APPLICABLE ELDERLY AN	ID DISABLED E	XEMPTION (OPTION	IAL) INCOME AND ASSET	LIMITS		
Income Limits	Disabled Exemption	Elderly	Exemption	Elderly Exem	ption Per Age	Category	
Single	\$	\$	19,600	65 - 74 years of age	\$	30	0,000
Married	\$	\$	26,600	75 - 79 years of age	\$	50	0,000
Asset Limits				80 + years of age	\$	7	7,000
Single	\$	\$	50,000				
Married	\$	\$	50,000				
		ОТ	HER EXEMPTIONS		Grante	d Denied	Date
Elderly Exe	mption		Amount \$	5	ATTO COLUMN		Date
Disabled Ex						H	
Improveme	nts to Assist the Deaf			5		П	
Improveme	nts to Assist Persons with Disabili	ties	Amount \$		_		
Blind Exem	2		Amount \$				
Deaf Exem				S			
	gy Systems Exemption ng Energy Systems Exemption			S			
	red Energy Systems Exemption			5	_	H	
	of this Form (Pages 1 &	2) or a Form			−	r after an	proval
	fore July 1st.	2) 01 41 01111	TY CO Made bo	rotarnou to the prop	o. ty o		p
The following do	cumentation may be requested at	the time of appli	cation in accordance	with RSA 72:34, II:			
List of asse	List of assets, value of each asset, net encumbrance and net value of each asset.						
* Statement of applicant and spouse's income.							
* Federal	Income Tax Form.						
* State Interest and Dividends Tax Form.							
* Property Tax Inventory Form filed in any other town.							
* Documents are considered confidential and are returned to the applicant at the time a decision is made on the application.							
Municipal Notes							
Selectmen/Asse	ssor(s) Printed Name	Signature	es(s) of Approval (in ir	nk)		Date	е
	_0						
	8						