



2021/2022

2021/2022 Renewal Application for Aged

ALL RENEWALS MUST BE  
FILED ON OR BEFORE  
MARCH 1, 2021

Senior Income Limit \$37,400.00

PART A

This is the annual renewal application for your 2021/2022 Senior Citizen Real Property Tax Exemption. In order to approve your application the following criteria must be met:

- The completed renewal application, by law, must be filed with our office no later than **Monday, March 1, 2021**.
- A copy of your 2019 income information is on file with our office, simply sign the bottom of this form and return it in its entirety, to the above address as soon as possible.
- If filing as a surviving spouse (widow or widower) for the first time, a copy of your spouse's death certificate along with proof of your age and a copy of either your 2019 Income Tax Return, or all 2020 1099 Income Documents (ie: Social Security Statement(s), Pension, Interest, Wages, etc.)

**You must file every year to keep this exemption.**

We are pleased to advise you that everyone who is approved for a 2021/2022 Senior Citizen Real Property Tax Exemption, will automatically receive the Enhanced STAR Real Property Tax Exemption.

Answer the three (3) questions below, enter the date, your signature(s), and Social Security Number(s), as well as the phone numbers and e-mail address (if you have one).

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | <b>YES</b>               | <b>NO</b>                |
| 1) Do you own any other properties?  | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, Address: _____   |                          |                          |
| 2) Did owner file Federal or State Income Tax Return? ( <u>  </u> <b>2019</b> or <u>  </u> <b>2020</b> ) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Do any children, attending public school, reside on this property?                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| If Yes, Name of School: _____ Grade: _____   |                          |                          |

Date	Signature	SS#
Date	Signature	SS#

Telephone No. \_\_\_\_\_ Cell No. \_\_\_\_\_ Emergency No. \_\_\_\_\_

e-mail address: \_\_\_\_\_