

TOWN OF HOPKINTON, MA
SENIOR AND DISABLED TAX RELIEF FUND
Application for Fiscal Year 2023

Applications are due
March 1, 2023

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION

INTRODUCTION:

The Hopkinton Senior and Disabled Tax Relief Fund provides property tax credits to qualifying residents. Applicants must own and occupy a single family home in Hopkinton as their primary residence. Subject to exceptions approved by the Tax Relief Committee on a case-by-case basis, the maximum annual income is \$45,000 for someone who is single and \$60,000 for a household. The owner, or at least one co-owner, must be at least 60 years old. There is no minimum age for persons with a state-recognized disability. The committee considers all forms of income and assets owned by the applicant and/or their spouse, excluding the primary residence and personal property. The amount of credit varies according the size of the fund and number of qualified applicants.

INSTRUCTIONS:

Please submit this form with accompanying documentation to: Tax Relief Committee, Town of Hopkinton, 18 Main Street, Hopkinton, MA 01748 or treasurer@hopkintonma.gov. The deadline is **March 1, 2023**. If you have questions, please call the Town Treasurer at (508) 497-9715.

PART 1 - APPLICANT

Name of Applicant: _____ Date of Birth: _____

Phone: _____ Marital Status: _____

email: _____ Do you have a disability? Yes No

Legal Residence: _____
Street City/Town Zip

Mailing Address: _____
Street City/Town Zip

Have you applied for the MA Senior Circuit Breaker Tax Credit? Yes No
If yes, please proceed to Section 5.

Have you applied for the Hopkinton Means-Tested Senior Tax Credit? Yes No
If yes, please proceed to Section 5.

PART 2 - PROPERTY

Is this a single family home? Yes No

Are you the Sole Owner Co-owner with Spouse Only Co-owner with Others

Was the property subject to a trust as of July 1, 2022?
If yes, Are you a Trustee? Yes No
Are you a Beneficiary? Yes No

Are you responsible for paying the property taxes? Yes No

Amount due on the mortgage: \$ _____ *Please proceed to the next page*

PART 3 - INCOME. Please attach a copy of your most recent Federal Tax return.

Retirement Benefits (Social Security, Railroad, Federal, MA & Political Subdivisions)	\$ _____
Wages, Salaries and other Compensation	\$ _____
Other Income <i>(including rental and investment income, and disability and veterans benefits)</i>	\$ _____
Total	\$ _____

PART 4 - ASSETS. Please attach bank and investment account statements.

Bank Accounts
Name of bank(s): _____

Value: \$ _____

Investments: Stocks, Bonds, Securities, etc.
Description: _____

Value: \$ _____

Other real estate owned (please describe)
Address: _____

_____ Value: \$ _____
Street City/Town Zip

PART 5 - SIGNATURE

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, this application and all accompanying documents and statements are true, correct and complete.

Signature: _____ Date: _____

TAX RELIEF COMMITTEE ONLY

Date: _____	Assessed tax: _____	Signed: _____
<input type="checkbox"/> CB/Means-Tested	Exempted Tax: _____	_____
<input type="checkbox"/> Age/Disability	Adjusted tax: _____	_____
<input type="checkbox"/> Ownership	Approved? Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
<input type="checkbox"/> Residency	Amount: _____	_____
<input type="checkbox"/> Single family		
<input type="checkbox"/> Tax Payer		
<input type="checkbox"/> Income, Assets		
<input type="checkbox"/> Other (please describe): _____		