

THE COMMONWEALTH OF MASSACHUSETTS
WESTFORD

ASSESSORS USE ONLY
41 A
<u>DATE RECEIVED</u>

SENIOR 65 AND OLDER
FY23 APPLICATION FOR PROPERTY TAX DEFERRAL

General Laws Chapter 59, Section 5, Clause 41A

THIS APPLICATION IS **NOT** OPEN TO PUBLIC INSPECTION
(See General Laws Chapter 59, Section 60)

MUST BE FILED YEARLY WITH BOARD OF ASSESSORS
NO LATER THAN APRIL 1ST

[Empty box for identification or notes]

A. IDENTIFICATION Fully Complete all sections that apply. (Please PRINT or TYPE)

Name of Applicant _____ Telephone Number _____ Date of Birth _____

Legal Residence (Domicile) on July 1, 2022 _____ Mailing Address (If Different) _____

Location of Property _____ **No. of Dwelling Units**
 1 2 3 4 Other

Did you own the property on July 1, 2022 and for the prior 10 years? YES NO
If No, list the other properties you owned/occupied during the past 10 years
Dates _____ Address _____

Have you been granted any exemption in **any other city/town OR state** for this year?
If yes, name of city/town/state _____ *Exempted Amt \$\$* _____
Amount you are seeking to defer: Full Year Tax Partial Tax *Amt \$\$* _____

DISPOSITION OF APPLICATION (ASSESSOR'S USE ONLY)

<input type="checkbox"/> Ownership	<input type="checkbox"/> GRANTED	Assessed Tax	_____
<input type="checkbox"/> Occupancy	<input type="checkbox"/> DENIED	Exempted Tax	_____
<input type="checkbox"/> Status	<input type="checkbox"/> DEEMED DENIED	Adjusted Tax	_____
<input type="checkbox"/> Income		BOARD OF ASSESSORS	

Exemption: Clause 41A _____ Certificate No _____
Date Cert./Notice Sent _____
Date Voted/Deemed Denied _____

B. PERSONS WITH INTEREST IN PROPERTY.

Did you own the property on July 1, 2022?

YES

NO

If yes, were you:

Sole Owner

Co-Owner with Spouse Only

Co-Owner with Others?

Was there a mortgage on the property as of July 1, 2022?

YES

NO

If yes, Amt due on Mortgage \$\$ _____ Mortgagee _____

Was the property subject to a LIFE ESTATE as of July 1, 2022?

YES

NO

If yes, Name(s) of Remainder person(s) receiving property after your death) _____

Was the property subject to a trust as of July 1, 2022?

YES

NO

(If yes, attach trust instrument including all schedules.)

GO ON TO SECTION C

C. GROSS RECEIPTS FROM ALL SOURCES IN PRECEDING CALENDAR YEAR. COMPLETED COPIES OF FEDERAL INCOME TAX RETURNS(1040) to verify your income **ARE REQUIRED.** NOT THE MA RESIDENT TAX FILING. If you file for the Circuit Breaker Tax Credit that is your Federal 1040. If You Do Not File Taxes Please contact the IRS at 1-800-829-1040 to request a copy of your NON-FILING transcript or ask to have an IRS TAX FORM 4605 T sent to you.

	Applicant and Spouse(s)
Retirement Benefits (Social Security, Railroad, Federal, Mass. And Political Subdivisions)	<input type="text"/>
Disability Compensation	<input type="text"/>
Other Pensions and Retirement Benefits	<input type="text"/>
Wages, Salaries and other Compensation	<input type="text"/>
Net Profits from business or Profession or Property Rental	<input type="text"/>
Interest and Dividends	<input type="text"/>
Alimony, Child Support	<input type="text"/>
Other Receipts (Capital Gains, Public Assistance, etc.)	<input type="text"/>
TOTALS	<input type="text"/>

D. SIGNATURE. Sign here to complete the application.

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, all accompanying documents and statements are true, correct and complete.

Applicant Signature

Date

If signed by agent, attach copy of written authorization to sign on behalf of taxpayer.