



**City of Nashua**  
Assessing Department  
229 Main Street - Nashua, NH 03060

(603) 589-3040  
Fax (603) 589-3079

**2019 ELDERLY EXEMPTION ELIGIBILITY REQUIREMENTS (RSA 72:39a)**

\*\*\*\*Applications accepted after January 1, 2019\*\*\*\*

\*\*\*\*Filing deadline is April 15, 2019\*\*\*\*

⇒ Filing Procedures:

- 1) An Income and Asset Statement *covering the full calendar year preceding April 1<sup>st</sup>* must be completed.
- 2) **A permanent record card must be signed at the Assessor's Office.**

**Qualifications**

- Must be 65 years of age on or before April 1, 2019.
- Must be the owner of record on or before April 1, 2019.
- Must reside in the State of New Hampshire for **3 consecutive years** on or before April 1, 2019.
- Married couples must have been married for **5 consecutive years** on or before April 1, 2019.
- Must occupy the property as their principal abode to qualify for the elderly exemption.

⇒ *Income qualifications will include any gross income from all sources in the calendar year preceding April 1<sup>st</sup>*

- ◆ Single person income not to exceed \$50,000
- ◆ Married persons joint income not to exceed \$50,000

⇒ *Asset qualifications will include any assets on the date of application*

- ◆ Assets not to **exceed \$150,000** (excluding the home they reside in)
  - Any other real estate owned anywhere (individually, jointly, in common, fractional) including land, mobile homes, condos, timeshares, etc.
  - Checking and/or savings account balances
  - CD's, IRA's, 401K's, mutual funds, stocks, bonds, annuities, life insurance policies, money market, etc.
  - Any and all vehicles registered in your name including motor vehicles, cars, trucks, RV's, trailers, etc.

⇒ The following documents are needed to verify eligibility include but are not limited to:

- ◆ Property Tax Inventory Forms filed in any other town
- ◆ Federal income tax forms including all 1099 forms
- ◆ State interest and dividends tax forms
- ◆ Statements for checking and/or savings accounts
- ◆ Statements for CD's, IRA's, 401K, stocks and/or bonds, cash value of life insurance policies, money market, etc
- ◆ Statements of Social Security income
- ◆ Statement of VA benefits
- ◆ Driver's license or non-driver's ID
- ◆ Documentation of any fuel, electric or financial assistance received

⇒ Exemptions:      65-74 years of age as of April 1<sup>st</sup> = \$192,000  
                             75-79 years of age as of April 1<sup>st</sup> = \$224,000  
                             80 years of age and older as of April 1<sup>st</sup> = \$280,000

## 2019- Elderly Exemption Instructions for filling out application

1. If you are applying for the first time, or re-applying, the **filing period starts in January** (once you have all 2018 year-end statements and forms from your sources of income and financial institutions). **The filing deadline is April 15, 2019.**
2. For married/civil union couples applying, at least one must be 65 as of April 1<sup>st</sup> in the year of application.
3. An applicant must be a NH resident for three years prior to April 1<sup>st</sup>.
4. An applicant must have owned the residence by April 1<sup>st</sup>, individually or jointly; or if a spouse owns the residence, the couple must have been married/in civil union for five years or more.
5. Income and asset Limits:
  - 1) Single, widowed, divorced – Income limit is **\$50,000 Gross**, per year;
  - 2) Married/civil union – Income limit is **\$50,000 Gross**, per year;
  - 3) **\$150,000 Asset Limit**, not including your residence (single, married, civil union). Assets are as of the date of the application.
  - 4) **If residence is a 2-family or more and/or has a business run out of it**, only the portion that is the applicant's residence is excluded from the asset limit. The remaining portion of the multi-unit is considered to be an asset, an inspection will be required to determine its value.
6. Periodically the Assessing Department re-qualifies all Exemption recipients. If you have received a letter informing you that **your exemption is being reviewed**, you **must return** the application review package **by the deadline in the letter** so that we can determine if you still qualify. Failure and/or refusal to provide all requested documents (statements, trusts, etc.) are grounds for denial and removal of the exemption.
7. **Every line on the application must be filled in.** For lines that do not apply to you, enter a zero '0' or an "NA" for NOT APPLICABLE.
8. **For each line completed, you must provide the 2018 back-up document or statement that applies.**
9. If your property is in a TRUST when you apply, PLEASE include a copy with your application.
10. If you are already receiving the exemption and then place your property into a trust, you will receive a letter from this office when your new deed from the Registry of Deeds is sent to us.
11. This letter will inform you that a copy of your trust must be provided to this office so that it can be reviewed (to determine that you retained 'life or beneficial interest', or are an 'equitable title holder' or retained a 'life estate'). This is a State requirement (RSA 72:33, V).
12. Please be aware that failure to provide a trust by the stated deadline (in the letter) could result in removal of your exemption.
13. If the applicant received a transfer of real estate from a person under the age of 65, related by blood or marriage, within the preceding 5 years, no exemption is allowed. RSA 72:40-a, Limitations.
14. Should you no longer qualify due to changes in income and/or asset level, **or if your permanent residence is elsewhere**, you are obligated by law to advise the Assessing Department.
15. Applicants meeting all Statute requirements receive this exemption based on age group:
  - 1) 65-74 Years of Age                      \$192,000 Assessment Reduction
  - 2) 75-79 Years of Age                      \$224,000 Assessment Reduction
  - 3) 80 Years of Age and Up                \$280,000 Assessment Reduction

**City of Nashua  
Income and Asset Statement for Tax Year 2019  
to Be Completed by Owner Seeking Elderly Tax Exemption  
Per RSA 72:39a**

**Applications accepted after January 1, 2019**

**Filing deadline is April 15, 2019**

**ALL INFORMATION CONTAINED IN OR ATTACHED TO THIS DOCUMENT IS CONFIDENTIAL**

Account No. \_\_\_\_\_ Map/Lot \_\_\_\_/\_\_\_\_

Owner DOB \_\_\_\_\_ Verified Y \_\_\_ N \_\_\_

Owner DOB \_\_\_\_\_ Verified Y \_\_\_ N \_\_\_

(Applicant) Owner Name \_\_\_\_\_

Married Widow Single Divorced\* (Please circle one)

\*Trust Y \_\_\_ N \_\_\_ \* Life Estate Y \_\_\_ N \_\_\_

\* Must submit divorce decree. Keep on file? Y \_\_\_ N \_\_\_

Additional Owner Name \_\_\_\_\_

If married, how many years married to present spouse \_\_\_\_\_

Relationship \_\_\_\_\_

New Hampshire Resident Since \_\_\_\_\_

Address \_\_\_\_\_

Prior address if less than 3 years \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Do you own/run a business out of home? Y \_\_\_ N \_\_\_

Email address: \_\_\_\_\_

Do you have an in-law apartment? Y \_\_\_ N \_\_\_

Single Family \_\_\_ Multi Family \_\_\_ # of units \_\_\_\_\_

If a Multi Family, is there a mortgage? Y \_\_\_ N \_\_\_

Home Phone Number \_\_\_\_\_

Are you required to file an IRS Tax Return? Y \_\_\_ N \_\_\_

Cell Phone Number \_\_\_\_\_

**If yes, you must submit a copy of your 2018 IRS Tax Return.**

**Residence is owned:** Solely \_\_\_ With Spouse \_\_\_ With others \_\_\_

**Type of ownership:** Individually \_\_\_ Joint Tenants \_\_\_ \*In Trust \_\_\_ Tenants in Common \_\_\_ % owned \_\_\_

\*(Must submit document of the trust holding legal title)

**INCOME INFORMATION**

**FOR THE PERIOD JANUARY 1 TO DECEMBER 31, 2018**

If any of the following categories do not apply to YOU...please write NA in that space.

	Owner #1	Owner #2 (spouse)
Social Security	_____	_____
Social Security Disability Income (Title II or Title XVI)	_____	_____
Veterans Admin. Disability Income	_____	_____
SSI Received for Dependents	_____	_____
Wages, Salaries, Tips or Self Employment	_____	_____
Pensions	_____	_____
Interest and/or Dividend Income (all sources)	_____	_____
Real Estate Rental Income	_____	_____
Other Income including distributions, annuities, unemployment, gambling/lottery winnings, etc.	_____	_____
Financial Assistance including fuel, food stamps, electric assistance, etc.	_____	_____

Does anyone (other than spouse) live with you? Y \_\_\_ N \_\_\_

If yes, amount contributed to household (rent, bills or assistance paid annually) \_\_\_\_\_

Does anyone contribute to or support you financially on a regular basis? Y \_\_\_ N \_\_\_ If yes, how much annually? \_\_\_\_\_

**Total Income:** \$ \_\_\_\_\_

# ASSET INFORMATION

## AS OF THE DATE OF THIS APPLICATION

Do you own (individually, jointly, in common, fractional) any other real estate anywhere including homes, land, mobile homes or time shares Y\_\_\_\_\_ N\_\_\_\_\_

If yes, please submit a copy of the most recent tax bill.

Other Real Estate: \_\_\_\_\_  
 (Street Address) (Market Value) [Please attach copy of property tax bill]

Other Real Estate: \_\_\_\_\_  
 (Street Address) (Market Value) [Please attach copy of property tax bill]

Vehicle 1: \_\_\_\_\_ Vehicle 2: \_\_\_\_\_  
 (Year, Make, Model) (Mileage) (Value) (Year, Make, Model) (Mileage) (Value)

Trailer/RV \_\_\_\_\_ Other\* : \_\_\_\_\_  
 (Year, Make, Model) (Mileage) (Value) (Description) (Value)  
 (\* Boat or other recreation vehicle)

**\*\*\*You must submit copies of your most recent statement(s) from all financial institutions (including all pages).\*\*\***

List all banking resources

Date of  
Document

Checking Account #	Bank Name	Balance	Date of Document
		\$	
		\$	
		\$	

Savings Account #	Bank Name	Balance	
		\$	
		\$	

Credit Union Acct #	Credit Union Name	Balance	
		\$	
		\$	

Certificate of Deposit #	Bank/Institution Name	Balance	
		\$	
		\$	

I. R. A. Account #	Bank/Institution Name	Balance	
		\$	
Money Market#		\$	

Stocks/Bonds Acct #	Company/Institution	Balance	
		\$	
Annuities#		\$	

Mutual Funds	Company/Institution	Balance	
		\$	
Cash Value of Life Insurance Policies		\$	

**Total Assets \$ \_\_\_\_\_**

Unless you are exempted from filing these forms, the following **must** be submitted with this document:

- Federal Income Tax Return including all 1099's
- State Interest and Dividends Form
- Property tax inventory form filed in any other town
- One entire current bank statement for each checking and savings account (all pages)
- Entire current statements for CD's, IRA's, stocks, bonds, annuities, etc.

**Assets disclosed by the applicant on this application will be verified through all resources available to the City of Nashua and the Assessing Department.**

**I swear, under penalty of perjury, that the information provided in this Income and Asset Statement is a correct and accurate accounting of my/our financial condition to the best of my/our knowledge.**

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner (spouse) Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public/ Justice of the Peace

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public/ Justice of the Peace

\_\_\_\_\_  
Date

**\*\*Notary services available within the Assessing Department\*\***

**Documents are considered confidential and all original documents will be returned at the time the application is submitted. Copies will be made to determine if the applicant is qualified for the exemption. Please choose an option below for the handling of the copies after a decision has been made.**

**Copies mailed Back \_\_\_\_ (stamped envelope required)**

**Or**

**Copies shredded by Assessing Staff \_\_\_\_**

Do not write below this line. For Assessing Office Only

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Notes/Comments:

**The city will not release or discuss your information with any party without your express written permission.**

Check here if you would like us to discuss your application with a friend, family member or caregiver. \_\_\_\_\_

Date \_\_\_\_\_

I (We) \_\_\_\_\_

\_\_\_\_\_

give the Nashua Assessing Department permission to discuss with

\_\_\_\_\_

any financial information necessary to complete my application for the Elderly Exemption for 2019.

Signature of Applicant: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

If there are additional questions or documentation needed, who should be contacted first?

\_\_\_\_\_