

TAXPAYER INFORMATION CONCERNING THE TOWN OF NORTHBOROUGH ELDERLY AND DISABLED TAXATION FUND

You may be eligible to receive assistance in paying a portion of the real estate taxes assessed on your residence if you meet the criteria and if adequate funding is available. **Massachusetts General Law, Chapter 60 Section 3D** authorizes voluntary contributions by citizens to a Tax Relief Fund. The purpose of the fund is to provide tax relief for elderly and disabled low-income citizens. The Town of Northborough Elderly and Disabled Taxation Committee ("The Committee") is responsible for overseeing the Fund and its distribution.

The Committee has adopted the following criteria and procedures in connection with the Fund.

APPLICATION PROCEDURE

Applications may be obtained at the Northborough Senior Center, at Town Hall in the Office of the Assessors, or on the Town's Website via the EDTF Committee's page. Applications must be filed between January 1st and March 1st of each year and returned to the Assessors' Office at the Town Hall. The applications are for the fiscal year in which the application is filed. The fiscal year runs from July 1 to June 30. Applications must be completed in full in order for the Committee to properly review them. **Please direct any questions to (508) 393-5049 or (508)393-5007.**

PROCEDURE FOR REVIEW

Once the application deadline has passed, the Town of Northborough Elderly and Disabled Taxation Fund Committee will review the applications and make decisions as to the disposition of funds. In the review of an application, the Committee shall consider income, age, disability status and an applicant's eligibility for other tax exemptions. The Committee also reserves the right to use discretion regarding applicants with special circumstances and/or undue hardships that hinder their ability to pay their real estate tax obligation.

Applicants must meet the following eligibility requirements:

- 60 years of age or older **OR** have a disability as defined by the ADA – the determination of disability eligibility is at the sole discretion of the Committee.
- Town resident and property owner for at least **(3)** three years
- Annual household income of less than **\$45,180** (individual) and **\$61,320** (total household)
- The assessed value of your home cannot exceed **\$624,468** (average single family home value)

Applicants will also be asked to disclose household assets that shall be considered in the review process. The ability of the Committee to approve applications and grant relief is subject to the availability of funds. Funds awarded by the Committee may be used in conjunction with other Tax Exemption programs offered by the Town **except** the Senior Tax Deferral.

NOTIFICATION OF THE APPLICANT

The Committee shall complete its review of all applications prior to the due date of the fourth quarter tax bill of the fiscal year. The Committee shall notify applicants, in writing, as to the disposition of the application. Awards will be applied by the Collector to the recipient's tax obligation.

Applicants are advised that the filing of an application in no way impacts the applicant's obligation to pay their taxes. To preserve the applicant's right to appeal with the Appellate Tax Board, every applicant must make all payments of the tax bill as required by law.

All information provided shall remain confidential and will not be used by the Town for any purpose other than to determine eligibility for the Elderly and Disabled Tax Fund.

ELDERLY & DISABLED TAXATION FUND

TOWN OF NORTHBOROUGH, FISCAL YEAR 2024 APPLICATION FOR PROPERTY TAX RELIEF MASSACHUSETTS GENERAL LAW CHAPTER 60 3D

To be eligible for this tax relief:

- You must own and occupy your residence in Northborough for at least the past **3** consecutive years.
- You or your spouse must be at least **60** years old by January 1, 2023 **or** have a **disability** as defined by the ADA.
- Income cannot exceed **\$45,180** per year for individual or **\$61,320** per year for total household.
- The assessed value of your home cannot exceed **\$624,468** (average single family home value)

INSTRUCTIONS: Please complete all Sections & submit with these documents to the Assessor or Senior Center.

- 2023 Federal Income Tax Form – all pages
- 2 months' recent bank statements, and proof of other asset values (see below)

Assessors Office: 508-393-5007, Lkeomanivong@town.northborough.ma.us, 63 Main Street

Senior Center Outreach Coordinator: 508-393-5035, jehrhardt@town.northborough.ma.us, 119 Bearfoot Road

Filing As ☐ Elderly ☐ Disabled (Please provide documentation of disability)

Name of Applicant(s): _____

Location of Property: _____

Mailing Address (if different): _____

How long have you owned the Property? Years _____ Months _____

Type of Ownership: ☐ Sole Owner ☐ Co-Owner with Spouse Only ☐ Owner with Life Estate

☐ Co-Owner with Others (list) _____

Is the property subject to a trust? ☐ Yes ☐ No If Yes attach a copy of trust and list of beneficiaries.

Have you been granted any other Real Estate Tax Relief for this year? ☐ Yes ☐ No

If Yes, what was the type of Relief? _____ Amount Granted \$ _____

****Relief amounts awarded by the EDTF Committee may be used in conjunction with other Tax Exemption programs offered by the Town except for the **Senior Tax Deferral**.****

If you are filing as Disabled, please describe the disability as defined by the ADA:

B. HOUSEHOLD

Please list all who reside at this address, **including owners**, dependents, and others who live with you.

| NAME | AGE | YEARLY INCOME |
|-------|-------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

C. ANNUAL HOUSEHOLD INCOME

| | Applicant | Spouse/Co-Owner(s) | Other Occupants |
|---|-----------|--------------------|-----------------|
| Social Security Benefits, Gross | _____ | _____ | _____ |
| Pension/Retirement Distribution Income..... | _____ | _____ | _____ |
| Wages, Salaries and Other Compensation..... | _____ | _____ | _____ |
| Interest and Dividends..... | _____ | _____ | _____ |
| Other Receipts (Rent, Capital Gains, etc.)..... | _____ | _____ | _____ |
| TOTAL ANNUAL GROSS INCOME..... | _____ | _____ | _____ |

D. ASSETS**REAL ESTATE:**

| | Location | Valuation |
|----------------|----------|-----------|
| Residence | _____ | _____ |
| Other property | _____ | _____ |

MORTGAGE OWED: ☐ Yes ☐ No _____ amount owed

REVERSE MORTGAGE: ☐ Yes ☐ No _____ amount available

EQUITY LINE of CREDIT ☐ Yes ☐ No _____ amount available

PERSONAL ESTATE:

Bank Accounts: Name of Bank
(Attach copies of last 2 months statements)

Balance

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Stocks, Bonds, Securities, CD's, IRA's, Annuities
(Attach copies of annual statements)

Value

TOTAL VALUE

D. COMMENTS

Please provide any comments regarding extenuating circumstances or explanations for the Committee to consider:

E. SIGNATURE: Sign below 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, it and all accompanying documents and statements are true, correct, and complete.

Your Signature

Date

OFFICIAL USE
ELDERLY & DISABLED TAXATION FUND COMMITTEE

Location of Property: _____

Parcel Identification: _____

Total taxes billed for FY2024: _____

Total adjustments to taxes: _____

Net taxes billed for FY2024: _____

**DISPOSITION OF APPLICATION
FOR USE BY TAXATION COMMITTEE**

GRANTED ☐

DENIED ☐

RELIEF AMOUNT GRANTED _____

Date Voted: _____

Date Relief Amount Applied _____

COMMITTEE MEMBERS

Principal Assessor

Treasurer

Cynthia Moore



TOWN OF NORTHBOROUGH

Senior Center
119 Bearfoot Road
Northborough, MA 01532
(508) 393-5035 Phone
(508) 393-1503 Fax

March 22, 2024

Dear Resident,

The application you submitted for a property tax exemption, or assistance through the Elderly/Disabled Tax Fund, indicates you may benefit from information about additional programs. As the Outreach Coordinator for the Northborough Senior Center, I am using this opportunity to share some resources and to offer my assistance with this process.

The Low-Income Home Energy Assistance Program (LIHEAP) is a home heating assistance program. For eligible applicants, this program is intended to help with (not fully cover) winter heating expenses. Approved applicants also receive a reduced electric rate. Residents that document their eligibility for LIHEAP can receive a quarterly discount on Northborough DPW water bills.

Other programs that can provide financial relief to eligible persons include the Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps. Incentive benefits are available to SNAP users that purchase fresh fruits and vegetables from participating farm stands and farmer's markets. SHINE volunteers offer unbiased consultation regarding Medicare insurance coverage. Consultation with a SHINE counselor may improve coverage and save money. SHINE counselors are also knowledgeable about cost saving insurance assistance programs.

Please contact me for more information about these important programs (508-393-5035, jehrhardt@town.northborough.ma.us).

Sincerely,

Jocelyn Ehrhardt