

Town of Groveland
Fiscal Year 2005

Assessor Use Only
MGL Ch 59 § 5 Clause 37A
Date Received:

BLIND
APPLICATION FOR STATUTORY EXEMPTION

General Laws Chapter 59, Section 5

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

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Must be filed with the Board of Assessors on or before December 15, or 3 months after the actual (not preliminary) tax bills are mailed for the fiscal year if later.

INSTRUCTIONS. Complete all sections fully. Please print or type.

A. IDENTIFICATION.

Name of Applicant _____

Marital Status _____ Social Security No. _____
(optional)

Legal Residence (Domicile) on July 1, 2004 _____

Mailing Address (If different) _____ Tel No. _____

Did you own the property July 1, 2004? _____

If yes, were you ___ Sole Owner ___ Co-Owner with spouse only ___ Co-Owner with others

Was the property subject to a Trust as of July 1, 2004 _____ (If yes, attach Trust Instrument)

Have you been granted an exemption in any other city or town this year? _____

If yes, name of City or Town _____ Amount Exempted \$ _____

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)
Ownership GRANTED Assessed Tax Exempted Tax Adjusted Tax
Occupancy DENIED
Status DEEMED DENIED
Date
Board of Assessors

Filing this form does not stay the collection of your taxes.

B. EXEMPTION STATUS – Please complete the box.

Were you legally blind as of July 1, 2004? _____
Are you registered with the Massachusetts Commission for the Blind? _____
Certificate # _____ Date Registered _____

Attach a copy of your certificate.

C. SIGNATURE

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

Signature

Date

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