

2015 CIRCUIT BREAKER APPLICATION (Must be filed by March 31st 2016)

Today's Date: _____
 Applicant: _____
 Date of Birth: _____
 Property Address: _____
 Plat / Lot: _____
 Phone Number: _____
 E-Mail Address: _____
 Account Number: _____
 Life Estate Held By: _____

| ALTERNATE CONTACT INFO: | |
|-------------------------|--|
| Name: _____ | |
| Relation: _____ | |
| Address: _____ | |
| City/State/Zip: _____ | |
| Phone Number: _____ | |
| E-Mail Address: _____ | |

Under the provisions of an ordinance granting certain assessment reductions on real estate owned and occupied by persons over sixty five (65) years of age who shall file qualified and certified annual statements of income with the Tax Assessor on or before the last day on which sworn statements may legally be filed.

Statement of Income (from whatever source)

(a) Salary or wages:..... \$ _____
 (b) Social Security:..... \$ _____
 (c) Insurance Annuities:..... \$ _____
 (d) Pensions, Trusts, etc:..... \$ _____
 (e) Bank or other interest bearing accounts:..... \$ _____
 (f) Rents or Leases:..... \$ _____
 (g) Sickness or Accident Insurance:..... \$ _____
 (h) Stock & Bonds:..... \$ _____
 (i) Capital gain on sale of real estate, personal, or intangible property:..... \$ _____
 (j) Gross income of children or others residing in home:..... \$ _____
 (k) All other income:..... \$ _____
 Total Income (do **not** count money from "Reverse Mortgages"): \$ _____

Certification:

If future tax exemptions is anticipated, I understand that I must make application to the Tax Assessor's Office **each year on or before March 31st** of the year immediately following the year for which tax exemption is requested. Should my financial situation improve, I agree to revise or upgrade the information contained in this application. I also understand that the Tax Assessor is empowered to investigate, require revision of, or validate any of the information contained herein, and that the information herein is given subject to penalties contained in the ordinance.

I swear under penalty of perjury that the foregoing information is true, complete, and correct.

Signature: _____

Subscribed and sworn to before me, on this the _____ day of _____ (year)
 _____ (Notary Public)

FOR ASSESSOR'S USE ONLY

Exempt Amount: CB28 = \$1,050 CB24 = \$1,700 CB20 = \$2,350 CB16 = \$3,000

Granted: Denied: Signature: _____ Date: _____