

ASSESSORS USE ONLY
37
DATE RECEIVED
APPLICATION NO.
PARCEL ID.

THE COMMONWEALTH OF MASSACHUSETTS  
 CITY OF MALDEN  
 \_\_\_\_\_  
 NAME OF CITY OR TOWN

**BLIND**  
**FY 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.)

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

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**INSTRUCTIONS: Complete all sections fully. (Please print or type.)**

**A. IDENTIFICATION.**

Name of Applicant \_\_\_\_\_ Marital Status \_\_\_\_\_  
 Social Security No. \_\_\_\_\_ (optional) Tel. No. \_\_\_\_\_  
 Legal Residence (Domicile) on July 1, \_\_\_\_\_  
 Mailing Address (If different) \_\_\_\_\_  
 Location of Property \_\_\_\_\_ No. of Dwelling Units \_\_\_\_\_  
 Did you own the property on July 1, ?  Yes  No  
 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, ?  Yes  No  
 (If yes, attach trust instrument including all schedules.)  
 Have you been granted any exemption in any other city or town for this year?  Yes  No  
 If yes, name of city or town \_\_\_\_\_ Amount exempted \$ \_\_\_\_\_

**DISPOSITION OF APPLICATION (ASSESSORS' 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 _____
		<b>BOARD OF ASSESSORS</b>
Date Voted/ Deemed Denied _____		_____
Certificate No. _____		_____
Date Cert./Notice Sent _____		_____
		Date _____

**B. EXEMPTION STATUS.**

Were you legally blind as of July 1, \_\_\_\_\_ ?  Yes  No

Are you registered with Mass. Commission for the Blind?  Yes  No

If yes, give Certificate Number \_\_\_\_\_ Date Registered \_\_\_\_\_  
(Attach copy of certificate.)

If no, attach a letter from your doctor indicating status as of July first.

**C. 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, it and all accompanying documents and statements are true, correct and complete.

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Date

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

**TAXPAYER INFORMATION ABOUT PERSONAL EXEMPTIONS**

**PERSONAL EXEMPTIONS.** You may be eligible to reduce all or a portion of the taxes assessed on your domicile if you meet the qualifications for one of the personal exemptions allowed under Massachusetts law. Qualifications vary, but generally relate to age, ownership, residency, disability, income or assets.

You may be eligible for an exemption if you fall into any of these categories:

- Blind
- Veteran with a service connected disability
- Surviving Spouse
- Minor Child of Deceased Parent
- Senior Citizen age 70 and older.

More detailed information about the qualifications for each exemption may be obtained from your Board of Assessors.

**WHO MAY FILE AN APPLICATION.** You may file an application if you meet all qualifications for a personal exemption as of July first. You may also apply if you are the administrator or executor of a person who qualified for a personal exemption on July first.

**WHEN AND WHERE APPLICATION MUST BE FILED.** Your application must be filed with the Board of Assessors by December 15 or 3 months after the actual tax bills were mailed for the fiscal year, whichever is later. **THIS DEADLINE CANNOT BE EXTENDED OR WAIVED BY THE ASSESSORS FOR ANY REASON. IF YOUR APPLICATION IS NOT TIMELY FILED, YOU LOSE ALL RIGHTS TO AN EXEMPTION AND THE ASSESSORS CANNOT BY LAW GRANT YOU ONE. AN APPLICATION IS FILED WHEN RECEIVED BY THE ASSESSORS.**

**PAYMENT OF TAX.** Filing an application does not stay the collection of your taxes. In some cases, you must pay the tax when due to appeal the assessors' disposition of your application. Failure to pay the tax when due may also subject you to interest charges and collection action. To avoid any loss of rights or additional charges, you should pay the tax as assessed. If an exemption is granted and you have already paid the entire year's tax as exempted, you will receive a refund of any overpayment.

**ASSESSORS DISPOSITION.** Upon applying for an exemption, you may be required to provide the assessors with further information and supporting documentation to establish your eligibility. The assessors have 3 months from the date your application is filed to act on it unless you agree in writing before that period expires to extend it for a specific time. If the assessors do not act on your application within the original or extended period, it is deemed denied. You will be notified in writing whether an exemption has been granted or denied.

**APPEAL.** You may appeal the disposition of your application. The disposition notice will provide you with further information about the appeal procedure and deadline.