THE COMMONWEALTH OF MASSACHUSETTS APPLICATION FOR RESIDENTIAL EXEMPTION FISCAL YEAR

PLEASE COMPLETE AND RETURN TO:

USPS: CITY OF MALDEN-BOARD OF ASSESSORS, 215 PLEASANT STREET, SUITE 240, MALDEN, MA 02148

E-MAIL: ASSESSOR@CITYOFMALDEN.ORG

MUST BE FILED WITHIN 3 MONTHS AFTER THE DATE OF THE THIRD QUARTER TAX BILL

Any change to your deed requires you to re-apply for the residential exemption. Even if you are the same owner, but you recently put your property into a trust, you need to re-apply.

Applicant/Owner:			
Phone Number:			
Property Address:			
Was the real estate owned and occupied by you as your principal residence on January 1, ? Yes No			
How did you acquire the property? (ex: purchase, inheritance)Date Acquired			
List location (street/city/state) of any other residential real estate owned by you:			
Have you ever received a residential exemption in any other city or town? If so, give address of the property and the year(s) in which the exemption was received. Address:			
Will you receive or have you applied for a residential exemption in any other city or town for the fiscal year to which this application relates? If so, give the name of the city or town and the address of the property to which the exemption relates			
Signing this form under penalties of perjury has the legal effect of swearing under oath to the truthfulness of the information contained herein: All items on this form must be completed. In addition to other sanctions provided by law, intentional misrepresentation of facts in this application my result in cancellation of this exemption.			
Today's Date:			
Signature of Applicant:			

Assessors Use Only:

Notice	Hearing / held:// with		
Exemption: in previous year \$ (ALLOWED OR DISALLOWED)			
EXEMPTION DISALLOWED:	(REASON)		
EXEMPTION ALLOWED TO THE EXTENT OF \$	ON THE TOTAL VALUATION OF \$		
Under General Laws, Chapter 59 S. 5C			
MALDEN BOARD OF ASSESSORS			