

Town of Natick
Fiscal Year 20__

<p><u>Assessor Use Only</u> MGL Ch 59 § 5 Clause 37A Date Received:</p>

**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.)

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 _____

Legal Residence (Domicile) on July 1, 20__? _____

Mailing Address (If different) _____ Tel No. _____

Did you own the property July 1, 20__? _____

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, 20__? _____ (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	_____
___ Occupancy	___ DENIED	Exempted Tax	_____
___ Status	___ DEEMED DENIED	Adjusted Tax	_____
	Date _____		_____

			Board of Assessors

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

B

37A

B. EXEMPTION STATUS – Please complete the box.

Were you legally blind as of July 1, 20__? _____ 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.