City of Rochester
Department of Finance
City Hall Room 101A, 30 Church Street
Rochester, New York 14614-1299
www.cityofrochester.gov

one city ROCHESTER
Bureau of Assessment

First-Time

Please return the completed AGED Application in Person ASAP

You must apply no later than Monday, February 2, 2015

Dear Property Owner:

This is the first-time application for the Real Property Tax Senior Citizen's Exemption.

You will be a first-time exemption applicant if you choose to apply. **It is necessary for you to come in person (bring your supporting documents)** to the City of Rochester, Bureau of Assessment, City Hall-Room 101A, 30 Church Street, any Monday through Friday (except Holidays) between 9:00 AM and 5:00 PM **by Monday, February 2, 2015.**

Last year's (**2013**) income information is requested on the application. You already have the necessary income tax returns, social security forms, bank interest statements, etc., you will need to file. We request that you bring in your tax returns (including schedules), 1099 statements, December 2013 statement of annual **IRA earnings (interest, dividends, capital gains, etc.)** and your original application form as soon as you can to avoid the busy periods later. The Assessment staff will complete the income portion of the application with you. Please bring proof of your age with you when you apply for the exemption. Once all filing information has been received, **a property inspection will be scheduled to verify residency and inventory.**

Approved Senior Citizen Exemptions in the City of Rochester reduce real property taxes for City, City School District, and County of Monroe tax bills. Depending on your **2013** income (which cannot exceed **$37,400**) tax abatements range from 50% down to 5% of your assessment.

All approved Senior Citizens Exemptions will automatically receive the Enhanced STAR exemption.

If you believe you may be over the income limit, please file anyway and we will review your information. If you fail to qualify for the Senior Citizens Exemption but your application demonstrates that you qualify for the **Enhanced STAR** exemption (income cannot exceed **$83,300**), your property will receive that exemption.

We look forward to helping you. If you need assistance completing the forms or have any questions, please call the **Exemption Hot-Line at (585) 428-6994** during business hours.

Warmest regards,

Thomas G. Huonker
City Assessor

City of Rochester, New York

APPLICATION FOR PARTIAL TAX EXEMPTION FOR REAL PROPERTY OF AGED PERSONS

RETURN APPLICATION BY: _____

LAST LEGAL DATE TO APPLY IS MONDAY, FEBRUARY 2, 2015
ALL FIRST TIME APPLICANTS MUST APPEAR IN PERSON

Remember to sign top of other side →

2015-2016

1.	**Name of owner or owners of property** (applicants)	**Property Address**
Owner:		
Spouse:		
Other:		

2. Status: ☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Divorced
If widowed, **submit** a copy of the death certificate with application.
If legally separated, **submit** a copy of the court documents with application.

3. Documents submitted with application as proof of age of owners:
Owner: ☐ Birth/Baptismal Certificate ☐ Drivers Lic. ☐ Other _____
Spouse: ☐ Birth/Baptismal Certificate ☐ Drivers Lic. ☐ Other _____
Other: ☐ Birth/Baptismal Certificate ☐ Drivers Lic. ☐ Other _____

4a. Do all the owners of the property reside on the premises? ☐ Yes ☐ No
4b. If answer to **4a** is **NO**, does the owner reside in a health care facility? ☐ Yes ☐ No
4c. If answer to **4b** is **YES, provide a statement from the facility indicating the amount paid in 2013.**

5. Are any school age children (including tenant children) residing on premises? ☐ Yes ☐ No
If **YES**, Student Name Grade Level School Attended
_____

6. Did applicant(s) file for **2013:** Federal Income Tax Return? ☐ Yes ☐ No
New York State Return? ☐ Yes ☐ No

If **YES** for either, attach a **copy** of the return(s) and schedules and a **copy** of the 2013 Social Security 1099.
If **NO,** submit all **2013** income statements (1099's).

7. Is there another person the City should contact if we have any questions regarding your application? ☐ Yes ☐ No
Name _____ Telephone # _____
e-mail: _____

NOTE: You can only have one Aged exemption in New York State and none from other states.

AGEAPF

PLEASE ANSWER THE FOLLOWING: (Attach additional sheets if explanation is necessary)

YES ☐ NO ☐ Is there another person the City should contact if we have any questions regarding your application?

Name _____ Telephone # _____

e-mail: _____

YES ☐ NO ☐ Are any school-age children (including tenant children) residing on the property? If **YES,** which schools do they attend?

Student Name	Grade Level	School Attended

YES ☐ NO ☐ Since filing last year's application, has there been any change in the **OWNERSHIP** of the property? **If not previously submitted, please attach a copy of the Death Certificate for any owner who has died within the past 12 months.**

YES ☐ NO ☐ Since filing last year's application, has there been any change in the **OCCUPANCY** of the property? If the property is no longer your legal residence or an owner is confined to a health care facility, please provide a statement from the facility indicating amount paid in 2013.

YES ☐ NO ☐ Since filing last year's application, has there been any change in the **USE** of the property? If the property is no longer used exclusively as a one, two, or three family residence, please explain.

IMPORTANT NOTICE:
ALL OWNERS AND SPOUSES MUST SIGN THIS APPLICATION

* I certify that all statements submitted with this application are true and correct to the best of my belief and I understand that any willful false statement of material fact will be grounds for disqualification from further exemption for a period of five years and a fine of not more than $100.00. *

SIGNATURE(S)	DATE	TELEPHONE #	SOCIAL SECURITY NUMBER
X _____ YOUR SIGNATURE	_____	_____	_____-____-_____
X _____ SPOUSE'S OR OTHER OWNER'S SIGNATURE	_____	_____	_____-____-_____

e-mail: _____

IF YOU HAVE ANY QUESTIONS, PLEASE CALL: 585-428-6994

Please use the enclosed envelope and mail to:

City of Rochester
Bureau of Assessment
30 Church Street, Room 101A
Rochester, NY 14614

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