



## First-Time

**Please return the completed Senior Citizen Exemption Application in Person ASAP**

**You must apply no later than February 1, 2021**

Dear Property Owner:

This is the first-time application for the Real Property Tax Senior Citizen's Exemption (RPTL-467).

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. Due to COVID-19 and social distancing guidelines, we urge you to call 585-428-6994 and schedule an appointment for any business day between 9:00 AM and 4:00 PM.

Last year's (**2019**) income information is requested on the application. You should 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 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 **2019** income (which cannot exceed **\$37,400**) tax abatements range from 50% down to 5% of your assessment.

**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 you may qualify for the **Enhanced STAR** exemption (RPTL-425) (income cannot exceed **\$90,550**).

*Information regarding the Enhanced Star Exemption for Seniors:*

- *If you qualify for the Senior Citizen exemption **and** you currently have a Basic Star exemption, we can upgrade your Basic Star to the Enhanced Star for greater tax savings but you must fill out the additional New York State forms enclosed in this package.*
- *If your income exceeds the \$37,400 limit, but not greater than \$90,550 and you are currently receiving the Basic Star exemption, you still qualify for the Enhanced Star Exemption. Fill out and submit the RP-425 forms to the Bureau of Assessment.*
- *If you qualify for the Senior Citizen exemption and you do **not** have a current Basic Star exemption, you should register with New York State to receive the Enhanced Star Credit. Visit [www.tax.ny.gov/star](http://www.tax.ny.gov/star) or call (518) 457-2036.*

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.

Sincerely,

Michael S. Zazzara  
City Assessor



# Application for Partial Tax Exemption for Real Property of Senior Citizens

For help completing this application, see Form RP-467-I, *Instructions for Form RP-467*. You must file this application with your local assessor by the taxable status date. Do **not** file this form with the Office of Real Property Tax Services.

This form may only be used to apply for the partial tax exemption for real property of senior citizens. It may **not** be used to apply for the Enhanced STAR exemption, which is a separate exemption.

Name(s) of owner(s)			
Mailing address of owner(s) (number and street or PO box)		Location of property (street address)	
City, village, or post office	State	ZIP code	City, town, or village
			State
			ZIP code
Daytime contact number	Evening contact number	School district	
E-mail address		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll)	
Name(s) of any non-owner spouse(s)			
Address(es) of primary residence(s) if different from above:			

1 Indicate which documents you included with this application as proof of age of owners (see instructions):

☐ Driver license    ☐ Birth certificate    ☐ Other (specify) \_\_\_\_\_

2 Date you acquired ownership of property (see instructions): \_\_\_\_\_

3 Indicate document included with application as proof of ownership (see instructions):

☐ Deed    ☐ Other (specify) \_\_\_\_\_

4 Do all the owners of the property presently occupy the premises as their legal primary residence? ..... Yes ☐ No ☐

4a If the answer to 4 is No, is an owner receiving medical care as an in-patient in a residential health care facility? ..... Yes ☐ No ☐

4b If the answer to 4a is Yes, specify name and location of the facility: \_\_\_\_\_

4c If the answer to 4 is No, is the non-resident owner the spouse or former spouse of the resident owner? .... Yes ☐ No ☐

4d If the answer to 4c is Yes, is he or she absent from the residence due to divorce, legal separation, or abandonment? ..... Yes ☐ No ☐

5 Is any portion of the property used for other than residential purposes (commercial, professional office, etc.)? ... Yes ☐ No ☐

5a If answer is Yes, explain such use and describe the portion that is so used. \_\_\_\_\_

- 6 List the income of each owner and spouse of each owner for the calendar year immediately preceding date of application. Attach additional sheets if necessary. (See instructions for income to be included.)

Name of owner(s)	2019 Source of income	Amount of income
<b>6a Total</b> income of owner(s) .....	<b>6a</b>	

Name of spouse(s) if not owner of property	2019 Source of income of spouse(s)	Amount of income of spouse(s)
<b>6b Total</b> income of spouse(s) .....	<b>6b</b>	
<b>6c Total</b> income of owner(s) and spouse(s) (add line 6a and line 6b) .....	<b>6c</b>	

- 7 Of the income specified in line 6c how much, if any, was used to pay for an owner's care in a residential health care facility? Attach proof of amount paid: enter 0 if not applicable. (see instructions) .....

<b>7</b>	
<b>7a Total</b> income of owner(s) and spouse(s) (subtract line 7 from line 6c) .....	<b>7a</b>

- 8 Did the owner or spouse file a federal or New York State income tax return for the preceding year? ..... Yes ☐ No ☐  
If answer is Yes, attach copy of such return or returns (see instructions).

- 9 Does a child (or children), including those of tenants or lessees, reside on the property and attend a public school, grades pre-K through 12? ..... Yes ☐ No ☐

9a If the answer to 11 is Yes, list name and location of school(s):

\_\_\_\_\_

I (we) certify that all statements made on this application are true and correct to the best of my (our) belief and I (we) 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.

Signature (If more than one owner, all must sign)	Marital status	Phone number	Date

Is there another person the City should contact if we have any questions regarding your application?

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Email: \_\_\_\_\_

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***This Area for Assessor's Use Only***

Date application filed \_\_\_\_\_

Exemption applies to taxes levied by or for:

- ☐ Proof of age submitted
- ☐ Proof of ownership submitted
- ☐ Proof of income submitted
- ☐ Application approved
- ☐ Application disapproved

- ☐ Town \_\_\_\_\_ %
- ☐ County \_\_\_\_\_ %
- ☐ School \_\_\_\_\_ %
- ☐ Village \_\_\_\_\_ %

Assessor's signature	Date
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# Application for Enhanced STAR Exemption for the 2021-2022 School Year

**You must submit Form RP-425-IVP, Supplement to Form RP-425-E, with this form.**

**Note:** The STAR exemption program is closed to new applicants. This form is primarily for use by property owners with Basic STAR exemptions who wish to apply and are eligible for the Enhanced STAR exemption. If you are a new homeowner or first-time STAR applicant, you may be eligible for the STAR credit. Register with the NYS Tax Department at [www.tax.ny.gov/star](http://www.tax.ny.gov/star). For a list of who else should use this form, see the instructions on page 2.

Contact name			
Property identification: Tax map number or section/block/lot (see tax bill or assessment roll)			
Location of property (street address)			Unit number
City, town, or village		State	ZIP code
Mailing address of owner(s) (number and street - include unit number - or PO Box)		City, village, or post office	State ZIP code
Phone number		Email address	
Is this property held in a: Trust? Yes <input type="checkbox"/> No <input type="checkbox"/> Life estate? Yes <input type="checkbox"/> No <input type="checkbox"/>		*If yes, what is the legal name of the trust?	

- 1 Did you have a STAR exemption on this property for the 2015-2016 school year? ..... Yes ☐ No ☐

If No, you are **not** eligible for the Enhanced STAR exemption. However, you may be eligible for the Enhanced STAR **credit**. Register at [www.tax.ny.gov/star](http://www.tax.ny.gov/star)

- 2 Will all owners be at least 65 years of age as of December 31, 2021, **or** if the property is owned by a married couple or by siblings, will at least one of the spouses or siblings be at least 65 years of age as of December 31, 2021? ..... Yes ☐ No ☐

- 3 Is the total 2019 combined income of all the owners, and of any owners' spouses residing on the premises, less than or equal to \$90,550? (See Income for STAR purposes on page 3.) ..... Yes ☐ No ☐

**Note:** If you answered Yes to **both** questions 2 and 3, you **must** attach a copy of the 2019 federal or 2019 state income tax returns for **all** owners, including nonresident owners. If your assessor needs tax schedules and tax form attachments, they will contact you. The assessor may also require proof of age.

If you were not required to file a federal or New York State income tax return for 2019, submit Form RP-425-Wkst, *Income for STAR Purposes Worksheet*, to the assessor.

If you answered No to **either** question 2 or 3, then you **do not** qualify for the Enhanced STAR exemption, but may continue to receive Basic STAR.

- 4 Do you or your spouse own another property that is **either** receiving a STAR exemption in New York State **or** a residency-based tax benefit in another state, such as the Florida Homestead exemption? ..... Yes ☐ No ☐

If Yes, attach a list with the address and exemption or benefit information of each property.

(continued)

## Certification

**Caution:** Anyone who misrepresents his or her primary residence, age, or income:

- will be subject to a penalty of the greater of \$100 or 20% of the improperly received tax savings
- will be prohibited from receiving the STAR exemption or STAR credit for six years, and
- may be subject to criminal prosecution.

I (we) certify that all of the above information is correct, **that I (we) own the property listed above and it is my (our) primary residence.** I (we) understand it is **my (our) obligation to notify the assessor if I (we) relocate to another primary residence** and provide any documentation of eligibility that is required.

**All resident owners must sign and date this form. Attach additional sheets, if necessary.**

Signature	Date	Signature	Date
Signature	Date	Signature	Date

**Return this form with Form RP-425-IVP and proof of income to your local assessor by taxable status date (see Deadline below).**

## This Area for Assessor's Use Only

Date application received: \_\_\_\_\_

Proof of age: Yes ☐ No ☐

Proof of income: Yes ☐ No ☐

Proof of residency: Yes ☐ No ☐

Form RP-425-IVP received: Yes ☐ No ☐

Approved: Yes ☐ No ☐

Assessor's signature	Date
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## Instructions

**You must submit Form RP-425-IVP with this form when applying for the Enhanced STAR exemption.**

### General information

The Enhanced STAR exemption reduces the school tax liability for qualifying senior citizens by exempting a portion of the value of their home from the school tax.

To qualify, the home must be:

- owner-occupied, and
- the homeowners' primary residence.

The combined 2019 income of all owners, and any spouses who reside on the property must be less than or equal to \$90,550 **and** you must have had a STAR exemption on the same property for the 2015-2016 school year.

### Who should use this form:

You are not generally required to reapply annually for the exemption, but you must advise the assessor if the property is no longer your primary residence. You are

required to reapply for the exemption if the ownership of the property has changed due to:

- marriage,
- divorce,
- surrender of interest by a co-owner,
- survivorship,
- trusts,
- life estates, or
- name change(s).

**Deadline:** You must file this application **and proof of income and Form RP-425-IVP** with your local assessor on or before the applicable taxable status date, which is generally March 1.

### Exceptions:

- In the Village of Bronxville, it is January 1.
- In Nassau County, it is January 2.
- In Westchester towns, it is either May 1 or June 1.
- In cities, check with your assessor.

For further information, ask your local assessor. Visit our website or your locality's website to find your local assessor's contact information.

**Do not file this form with the New York State Department of Taxation and Finance or the Office of Real Property Tax Services.**

### Application instructions

Print the name and mailing address of each person who **owns** the property, including any non-resident owners. (If the title to the property is in a trust, or is held in a life estate, the trust beneficiaries or life tenants are deemed to be the owners for STAR purposes.) There is no single factor which determines whether the property is your primary residence, but the assessor will consider factors such as voting location, automobile registrations, and the length of time you occupy the property each year. The assessor may ask you to provide proof of residency and ownership. For the enhanced exemption, proof of age may also be required.

You can find the parcel identification number on either the assessment roll or your tax bill.

### Proof of income for STAR purposes

You are required to submit proof of income with this form. Proof of income is your 2019 federal or state income tax return. **Do not** submit your 2020 tax forms. If you were not required to file a federal or New York State income tax return for 2019, complete Form RP-425-Wkst, *Income for STAR Purposes Worksheet*, and submit it to the assessor along with this form. To determine your income eligibility, use the following table to identify line references on your 2019 federal or state income tax returns.

Form number	Title of income tax form	Income for STAR purposes
Federal Form 1040	U.S. Individual Income Tax Return	Adjusted gross income (line 8b) <b>minus</b> taxable portion of IRA distributions (line 4b)
NYS Form IT-201	Resident Income Tax Return	Federal adjusted gross income (line 19) <b>minus</b> taxable portion of IRA distributions (line 9)

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# Supplement to Form RP-425-E

## Mandatory for all Enhanced STAR Applicants

**RP-425-IVP**  
(8/20)

When applying for the Enhanced STAR exemption, you **must** submit this form to your assessor along with your Enhanced STAR application form and proof of income. For more information, see page 3.

Name(s) of owner(s)			
Location of property (street address; include unit number)		Mailing address of owner(s) (number and street - include unit number - or PO Box)	
City, town, or village	State	ZIP code	City, village, or post office
			State
			ZIP code
School district		Daytime contact number	Evening contact number
Property identification Tax map number or section/block/lot (see tax bill or assessment roll)		Email address	

All owners of the property, and any owner's spouse who resides on the premises, must provide their Social Security numbers and sign the authorization below. **Failure to do so will result in denial of the Enhanced STAR exemption.**

### Authorization

I (we) authorize the New York State Department of Taxation and Finance to annually verify, using my (our) Social Security number(s) supplied below, whether my (our) income is less than or equal to the applicable annual income standard for purposes of the Enhanced STAR exemption.

**First owner information** – Provide information for every owner, and any spouse even if not an owner.

First name and middle initial		Last name		Suffix
Social Security number	Date of birth (mm/dd/yyyy)		Is this your primary residence?	
				Yes <input type="checkbox"/> No <input type="checkbox"/>
Mark all that apply: Owner <input type="checkbox"/> *Spouse of an owner <input type="checkbox"/> *Sibling of another owner <input type="checkbox"/> * Provide name(s) of spouses and siblings below.				
Name(s) and relationship(s) of spouse or sibling/owner:				
Income information for first year of application (see instructions):				
Calculated income \$ _____		Tax year _____		Income documentation (mark one below):
Federal Form 1040 <input type="checkbox"/>		NYS Form IT-201 <input type="checkbox"/>		Form RP-425-Wkst (see instructions) <input type="checkbox"/>
Filing status: Single <input type="checkbox"/> Married filing joint <input type="checkbox"/> Married filing separate <input type="checkbox"/> Head of household <input type="checkbox"/> Qualifying widow(er) <input type="checkbox"/>				
Signature			Date	

(continues on page 2)

For assessor's use only	
Municipal code _____ 0 0	Ownership code (Enter <b>M</b> or <b>C</b> if this property is a mobile home or a cooperative) _____



**Additional owner or spouse information – Provide information for every owner, and any spouse even if not an owner.**

First name and middle initial		Last name		Suffix
Social Security number		Date of birth (mm/dd/yyyy)		Is this your primary residence? Yes <input type="checkbox"/> No <input type="checkbox"/>
Mark all that apply: Owner <input type="checkbox"/> *Spouse of an owner <input type="checkbox"/> *Sibling of another owner <input type="checkbox"/> * Provide name(s) of spouses and siblings below.				
Name(s) and relationship(s) of spouse or sibling/owner:				
Income information for first year of application (see instructions): Calculated income \$ _____ Tax year _____ Income documentation (mark one below): Federal Form 1040 <input type="checkbox"/> NYS Form IT-201 <input type="checkbox"/> Form RP-425-Wkst (see instructions) <input type="checkbox"/> Filing status: Single <input type="checkbox"/> Married filing joint <input type="checkbox"/> Married filing separate <input type="checkbox"/> Head of household <input type="checkbox"/> Qualifying widow(er) <input type="checkbox"/>				
Signature				Date

**Additional owner or spouse information – Provide information for every owner, and any spouse even if not an owner.**

First name and middle initial		Last name		Suffix
Social Security number		Date of birth (mm/dd/yyyy)		Is this your primary residence? Yes <input type="checkbox"/> No <input type="checkbox"/>
Mark all that apply: Owner <input type="checkbox"/> *Spouse of an owner <input type="checkbox"/> *Sibling of another owner <input type="checkbox"/> * Provide name(s) of spouses and siblings below.				
Name(s) and relationship(s) of spouse or sibling/owner:				
Income information for first year of application (see instructions): Calculated income \$ _____ Tax year _____ Income documentation (mark one below): Federal Form 1040 <input type="checkbox"/> NYS Form IT-201 <input type="checkbox"/> Form RP-425-Wkst (see instructions) <input type="checkbox"/> Filing status: Single <input type="checkbox"/> Married filing joint <input type="checkbox"/> Married filing separate <input type="checkbox"/> Head of household <input type="checkbox"/> Qualifying widow(er) <input type="checkbox"/>				
Signature				Date

**Additional owner or spouse information – Provide information for every owner, and any spouse even if not an owner.**

First name and middle initial		Last name		Suffix
Social Security number		Date of birth (mm/dd/yyyy)		Is this your primary residence? Yes <input type="checkbox"/> No <input type="checkbox"/>
Mark all that apply: Owner <input type="checkbox"/> *Spouse of an owner <input type="checkbox"/> *Sibling of another owner <input type="checkbox"/> * Provide name(s) of spouses and siblings below.				
Name(s) and relationship(s) of spouse or sibling/owner:				
Income information for first year of application (see instructions): Calculated income \$ _____ Tax year _____ Income documentation (mark one below): Federal Form 1040 <input type="checkbox"/> NYS Form IT-201 <input type="checkbox"/> Form RP-425-Wkst (see instructions) <input type="checkbox"/> Filing status: Single <input type="checkbox"/> Married filing joint <input type="checkbox"/> Married filing separate <input type="checkbox"/> Head of household <input type="checkbox"/> Qualifying widow(er) <input type="checkbox"/>				
Signature				Date

## Instructions

**You must include this form when applying or reapplying for the Enhanced STAR exemption.**

### General information

To apply for the Enhanced STAR exemption, submit this application and Form RP-425-E, *Application for the Enhanced STAR Exemption* to your assessor.

You must also provide proof of income as described on the above forms.

When submitting this form, you must supply the Social Security numbers of all owners of the property and of any owner's spouse who resides on the premises.

In the first year, the assessor will verify your eligibility based on the income information you provide. (See *Income information*.) In the following years, the New York State Department of Taxation and Finance will verify your income eligibility. You will not need to reapply for the exemption or provide copies of your tax returns to your local assessor.

The Tax Department will **not** disclose your income to the assessor. It will only disclose whether or not your income is below the applicable income standard.

**Nassau County homeowners:** Complete Form RP-425-IVP along with the county's *Enhanced STAR Property Tax Exemption Application*, which is available at Nassau County's website at [www.nassaucountyny.gov](http://www.nassaucountyny.gov) (search: *STAR*). Submit both forms to the address on page 2 of Nassau County's application.

### Income information

This is the income that the assessor will use to verify your eligibility in your first year of applying for the Enhanced STAR exemption.

- **Calculated income** – Refer to *Proof of income for STAR purposes* on page 3 of Form RP-425-E for instructions on how to calculate income.
- **Tax year** – Income is based on the tax year **two years prior** to the year for which you are applying for an exemption. For example, if you are applying for an Enhanced STAR exemption for the 2024-2025 school year, income is based on the 2022 tax year.
- **Income documentation** – Indicate the income tax form that was used to document income. If you did not file a Federal or New York State income tax return for the required year, complete Form RP-425-Wkst, *Income for STAR Purposes Worksheet*, and submit it with Form RP-425-E and this form.

### Privacy notification

The Privacy Act of 1974 requires us to advise you that the law which allows us to ask for your Social Security numbers is New York Real Property Tax Law section 425 (4)(b). It is mandatory that you furnish your Social Security numbers. Once you furnish them, they will be forwarded to the New York State Department of Taxation and Finance, which will use them to verify, or

attempt to verify, whether your income is greater than the applicable income standard for purposes of the Enhanced STAR exemption. **If you do not furnish your Social Security numbers, you will be unable to receive an Enhanced STAR exemption.**

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# Income for STAR Purposes Worksheet

To be used by individuals **not** required to file a federal or New York State income tax return.

Name of owner(s)

## Location of property

Street address

City/town

Village (if any)

School district

Income tax year

Enter the amounts below that would have been reported if you were required to file a federal or state income tax return (round to the nearest whole dollar).

- 1 Total wages, salaries, and tips (attach W-2(s)) .....
- 2 Taxable interest income and dividends .....
- 3 Unemployment compensation .....
- 4 Total pensions and annuities. Do not include IRA distributions (attach Form 1099) .....
- 5 Social security benefits (attach Form 1099) .....
- 6 Other income. List type(s) and amount(s) here: \_\_\_\_\_
- 7 Add lines 1 through 6. This is your **STAR** income .....

1	
2	
3	
4	
5	
6	
7	

## Certification

I (we) certify that all of the above information is correct and that I am (we are) not required to file a federal or New York State income tax return.

All owners **must** sign and date below.

Signature	Date	Signature	Date
Signature	Date	Signature	Date