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

Renewal

Please return the Senior Citizen Tax Exemption Application ASAP

(Last Legal Date to File is February 1, 2021)

Dear Renewal Applicant:

Enclosed is the Real Property Tax Senior Citizen's Exemption (RPTL-467) renewal application. For your convenience we encourage you to **mail** in your application. Due to COVID-19 and social distancing guidelines, if you find it necessary to come to the Bureau of Assessment, 30 Church Street, we urge you to call the exemption hotline at 585-428-6994 and schedule an appointment for any business day between 9:00 am and 4:00 pm. The last date to legally file is **Monday**, **February 1**, **2021**.

<u>PLEASE READ ALL DIRECTIONS AND QUESTIONS CAREFULLY</u>. Include <u>copies</u> of your <u>2019</u> Social Security SSA-1099 statement and your <u>2019</u> Federal and New York State tax returns (including schedules) if you are required to file. If you do not file tax returns, you must submit all <u>2019</u> year end 1099 statements to verify <u>2019</u> income.

The Assessment staff will complete the income portion of the renewal application. Your 2019 income cannot exceed \$37,400. We encourage you to submit your application even if you believe you are over the income limit. You may be eligible for an Enhanced STAR tax exemption that has an income ceiling of \$90,550.

You should already have received the 2019 papers you need to file your renewal. Your completed application must be received by the Bureau of Assessment no later than Monday, February 1, 2021. Prompt renewal will help assure that you continue to receive the benefits of this exemption.

Information regarding the Enhanced Star Exemption for Seniors:

If your income exceeds the \$37,400 limit, up to \$90,550, you still qualify for the Enhanced Star Exemption. Call the Exemption Hot Line (585) 428-6994 during business hours for more information.

As always, we are available to help you. Please call the **Exemption Hot-Line at (585) 428-6994** Monday through Friday between 9:00 a.m. and 5:00 p.m. if you need assistance.

Sincerely,

Michael S. Zazzar

City Assessor



Department of Taxation and Finance Office of Real Property Tax Services

RP-467-Rnw

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

To be filed with your local assessor by 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.

Nai	me of applicant(s)						
Ma	iling address (number and street or PO box)	Location of property (street address)					
City	y, village, or post office State ZIP code	City, village, or post office	State	ZIP code			
Day	ytime contact number	Evening contact number					
Em	nail address (optional)	School district					
1	Property identification (see tax bill or assessment roll)	1					
	Tax map number or section/block/lot						
2	Since filing your application last year, fully describe in the	lines below any changes in:					
	a title to the property (due to death, addition or deletion of	of owner);					
	b legal residence or occupancy of the property (e.g. confinement of owner in hospital or nursing home, divorce, legal separation or abandonment by spouse); or						
	c use of residence for other than residential purposes (store, office, farm, etc.).						
	d Children of owners, tenants or leaseholders living on the and location of the school or schools, and state whether substantial part for the purpose of attending a particular	er such child or children were brought	rades pre-K-12; if into the property	so, give the name in whole or in			
	Mark an $\boldsymbol{\mathcal{X}}$ in the box if there has been no change in ite	ems a, b, c , and d above					
	Explanation of changes that have occurred as indicated of	n line 2 (attach additional sheets if ne	cessary)				
3	Did the owner or spouse file a federal or New York State in If Yes, attach a copy of the return(s)			Yes No			
				(continued)			

Assessor's signature

Г	sary. See Form RP-467-I, <i>Instructions for</i> Names of owner(s) and spouse(s)	2019 Source		Amount of annual incon
4a T	otal income of owner(s) and spouse(s) (ad	ld all income sources)	4a	
re	of the income on line 4a, how much, if any, esidential health care facility? Attach proof see instructions)	of amount paid; enter 0 if not a	oplicable	
4c T	otal income of owner(s) and spouse(s	s) Subtract line 4b from line 4a	4c	
		rounds for disqualification from f	urther exemption for a	a period of five years, and a
	Signature (If more than one owner, all must sign)	Marital status	urther exemption for a	
	ot more than \$100. Signature	· 		
Is the	Signature (If more than one owner, all must sign) ere another person the City should contact	Marital status if we have any questions regard	Phone number	
Is the	Signature (If more than one owner, all must sign)	Marital status if we have any questions regard	Phone number	r Date
Is the	Signature (If more than one owner, all must sign) ere another person the City should contact e: Te	Marital status if we have any questions regard	Phone number	r Date
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ls the	Signature (If more than one owner, all must sign) ere another person the City should contact e: Te	Marital status if we have any questions regard lephone #:	Phone number ding your application?	r Date
Is the Name	Signature (If more than one owner, all must sign) ere another person the City should contact e: Te	Marital status if we have any questions regard lephone #:	Phone number ding your application?	r Date

Date