

Name:

Address:

Map/Parcel:

Key:

ASSESSORS USE ONLY



DATE RECEIVED

ASSESSORS USE ONLY

TOWN OF PROVINCETOWN

Assessors Office (508) 487-7017

FY 16 APPLICATION FOR AFFORDABLE HOUSING EXEMPTION

(Ch.408 of the Acts of 2002)

***Rental Certificate must be on file with Licensing Department
FY16 Tax Bill must be paid in full. Application Due July 1, 2016***

INSTRUCTIONS: Complete all sections that apply. Please print or type.

A. Identification: Complete this section fully.

Name of Applicant Property Owner _____

Social Security No. _____ (optional) Tel. No. _____

Mailing Address _____

Location of Property _____ No. of Dwelling Units _____

Did you own the property on July 1, 2015 _____? Yes No

If so, were you

Sole Owner Co-owner with spouse/partner only Co-owner with others

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)

Ownership GRANTED Assessed Tax _____
 Tenant Income DENIED Exempted Tax _____
 Lease Adjusted Tax _____
 Rental Certificate Verified _____

Board of Assessors:

Date Voted _____

Certificate No. _____

Date Cert./Notice Sent _____

Date

B. Rental information: Please complete information for each rental space for which you are seeking an exemption

Unit 1: Number of bedrooms in **this** affordable unit: Studio 2-bedroom 4-bedroom
 1-bedroom 3-bedroom

Rent _____/per month. Does this amount include all utilities? Yes No

If not, which utilities are paid by the tenant? (*ie, electric, gas or oil heat, etc.*) _____

(Note: The maximum allowable rent decreases if the tenant pays any utilities.)

Number of Renters _____ Name(s) of renter(s) _____

Mailing Address: (if different) _____ Phone: _____

Gross Receipts from all Sources (Please supply information for each renter). Copies of renters' state and federal income tax returns must be submitted to verify income.

Wages, Salaries and other Compensation..... _____

Unit 2: Number of bedrooms in **this** affordable unit: Studio 2-bedroom 4-bedroom
 1-bedroom 3-bedroom

Rent _____/per month. Does this amount include all utilities? Yes No

If not, which utilities are paid by the tenant? (*ie, electric, gas or oil heat, etc.*) _____

(Note: The maximum allowable rent decreases if the tenant pays any utilities.)

Number of Renters _____ Name(s) of renter(s) _____

Mailing Address: (if different) _____ Phone: _____

Gross Receipts from all Sources (Please supply information for each renter). Copies of renters' state and federal income tax returns must be submitted to verify income.

Wages, Salaries and other Compensation..... _____

Unit 3: Number of bedrooms in **this** affordable unit: Studio 2-bedroom 4-bedroom
 1-bedroom 3-bedroom

Rent _____/per month. Does this amount include all utilities? Yes No
If not, which utilities are paid by the tenant? (ie, electric, gas or oil heat, etc.) _____

(Note: The maximum allowable rent decreases if the tenant pays any utilities.)

Number of Renters _____ Name(s) of renter(s) _____

Mailing Address: (if different) _____ Phone: _____

Gross Receipts from all Sources (Please supply information for each renter). Copies of renters' state and federal income tax returns must be submitted to verify income.

Wages, Salaries and other Compensation..... _____

(USE ADDITIONAL SHEET IF MORE SPACE IS NEEDED)

ADDITIONAL INFORMATION

Do you have a lease for the aforementioned tenant(s) running from July 1, 2015 to June 30, 2016?

Yes No (If yes, please provide us with a copy of this.)

*Is your property rented **YEAR-ROUND** to income eligible tenants (ie, those making no more than 80% of the median household income for Barnstable County).*

Yes No

Note: Property owners, who believe they qualify, must reapply for this tax exemption each year. If a property qualifies for a particular year, the tax exemption would be granted for that year. Owners may not at any time occupy any part of the affordable unit.

If property owners rent at affordable rates to households earning above these income limits, they are not eligible for this tax exemption. Likewise, if property owners rent to tenants making less than 80% of the County median income, but at rents that are above those considered to be affordable, no tax exemption will be granted.

FY16 Real Property Tax Bill must be paid in full before any exemption is granted.
Rental Certificate must be on file with Licensing Department before any exemption is granted.
Deadline for filing this application is July 1, 2016.

C. Signature: Sign here to complete the application.

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete.

Property owner's signature

Date

Renter's signature

Date

Renter's signature

Date

Renter's signature

Date

Please Note:

FY16 Real Property Tax Bill must be paid in full before any exemption is granted.

Rental Certificate must be on file & current with the Licensing Department before any exemption is granted.

Deadline for filing this application is July 1, 2016

For more information or assistance, please contact:

TOWN OF PROVINCETOWN

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Provincetown, MA 02657
Assessors Office (508) 487-7017
Sfahle@provincetown-ma.gov