

TOWN OF LEICESTER

City or Town

Fiscal Year **2004**

**SURVIVING SPOUSE - MINOR
APPLICATION FOR STATUTORY EXEMPTION**

General Laws Chapter 59, Sections 5

| ASSESSORS USE ONLY | |
|--|-----|
| 17D | 41C |
| Date Received Application No. Parcel ID. | |

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION
(See General Laws Chapter 59, section 60.)

**Must be filed with Board of Assessors on or before December 15 or 3 months after actual
(Not Preliminary) tax bills are mailed for fiscal year if later.**

INSTRUCTIONS: Complete all sections fully. Please print or type.

A . IDENTIFICATION:

Name of Applicant _____

Marital Status _____ Social Security No. _____
(optional)

Legal Residence (Domicile) on July 1, _____

Mailing Address (If different) _____ Tel. No. _____

Location of Property _____ No. of Dwelling Units _____

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

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, _____? Yes [] No []

(If yes, attach trust instrument including all schedules.)

Have you been granted any exemption in any other city or town for this year? Yes [] No []

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 _____ |
| _____ Income | Date Voted /Deemed Denied _____ | BOARD OF ASSESSORS |
| _____ Assets | Certificate No. _____ | _____ |
| | Date Cert. / Notice Sent _____ | _____ |
| | Exemption : Clause _____ | _____ |
| | | Date _____ |

