## Qualifications for Disability Exemption

The deadline for filing this exemption is April $15^{\text {th }}$, but determination of eligibility is made as of April 1 st .

## Benefits:

$\$ 120,000 \quad$ This amount is deducted from your assessed value.

## Income Limitations:

Single $\quad \$ 28,500 \quad$ Includes all sources of income, including Soc. Sec.
Married \$38,500
If you are not required to file an income tax return, the enclosed form 8821 must be completed. This enables the Town to verify with the IRS that you are not required to file a tax return.

## Asset Limitations:

$\$ 50,000$ excluding the value of the residence and up to two (2) acres of land. (Includes all savings, stocks, bonds, cd's, vehicles, etc.)

The CONFIDENTIAL worksheet attached must be completed. Verification of all accounts, income assets, must be submitted with this application. (For example: most recent bank statement, income tax return, social security statement, pay stub, etc.)

If you have any questions or would like assistance in filling out this application, please call the Town Hall at 286-7039.

# V <br> TAXATION <br> CHAPTER 72 <br> PERSONS AND PROPERTY LIABLE TO TAXATION <br> Property Taxes <br> Section 72:37-b 

## 72:37-b Exemption for the Disabled. -

I. Upon its adoption by a city or town as provided in RSA 72:27-a, any person who is eligible under Title II or Title XVI of the federal Social Security Act for benefits to the disabled shall receive a yearly exemption in an amount to be chosen by the town or city. I-a. Upon the adoption of this paragraph by a city or town as provided in RSA 72:27-a, a person who is eligible under Title II or Title XVI of the federal Social Security Act on his or her sixty-fifth birthday shall remain eligible for a yearly exemption either in the amount of the exemption applicable under paragraph I or the amount of the elderly exemption granted to the person under RSA 72:39-b, whichever is greater.
I-b. Upon the adoption of this paragraph by a city or town as provided in RSA 72:27-a, any person who at any time previously was eligible under Title II or Title XVI of the federal Social Security Act for benefits to the disabled, but who is no longer eligible for such federal benefits due to reasons other than the status of that person's disability, shall be eligible for the exemption under paragraph I or l -a, or both as may be applicable, provided that the person submits an affidavit from a physician licensed in New Hampshire that attests to the fact that the person continues to meet the criteria for disability that are used under Title II or Title XVI of the federal Social Security Act.
II. The exemptions in paragraph I and I-a may be applied only to property which is occupied as the principal place of abode by the disabled person. The exemption may be applied to any land or buildings appurtenant to the residence or to manufactured housing if that is the principal place of abode. Nothing in this section shall preclude a qualified applicant from earning an income.
III. No exemption shall be allowed under paragraph I or I-a unless the person applying for an exemption:
(a) Had, in the calendar year preceding said April 1, a net income from all sources, or if married, a combined net income from all sources, of not more than the respective amount determined by the city or town for purposes of paragraph I or I-a. Under no circumstances shall the amount determined by the city or town be less than $\$ 13,400$ for a single person or $\$ 20,400$ for married persons. The net income shall be determined by deducting from all moneys received, from any source including social security or pension payments, the amount of any of the following or the sum thereof:
(1) Life insurance paid on the death of an insured.
(2) Expenses and costs incurred in the course of conducting a business enterprise.
(3) Proceeds from the sale of assets.
(b) Owns net assets not in excess of the amount determined by the city or town for purposes of paragraph I, excluding the value of the person's actual residence and the land upon which it is located up to the greater of 2 acres or the minimum single family residential lot size specified in the local zoning ordinance. The amount determined by the city or town shall not be less than $\$ 35,000$ or, if married, combined net assets in such greater amount as may be determined by the town or city. " Net assets " means the value of all assets, tangible and intangible, minus the value of any good faith encumbrances. "Residence " means the housing unit, and related structures such as an unattached garage or woodshed, which is the person's principal home, and which the person in good faith regards as home to the exclusion of any other places where the person may temporarily live. "Residence" shall exclude attached dwelling units and unattached structures used or intended for commercial or other nonresidential purposes.
(c) Has been a New Hampshire resident for at least 5 years.
IV. Additional requirements for an exemption under paragraph I or I-a shall be that the property is:
(a) Owned by the resident;
(b) Owned by a resident jointly or in common with the resident's spouse, either of whom meets the requirements for the exemption claimed;
(c) Owned by a resident jointly or in common with a person not the resident's spouse, if the resident meets the applicable requirements for the exemption claimed; or
(d) Owned by a resident, or the resident's spouse, either of whom meets the requirements for the exemption claimed, and when they have been married to each other for at least 5 consecutive years.
Source. 1993, 212:1. 1997, 87:1. 2003, 299:11. 2004, 238:2. 2008, 307:1, eff. April 1, 2008.

## Town of Northfield



Your application must be accompanied by:

* Copies of bank statements and verification of assets listed
* A copy of your most recent Income Tax Return.

If you are not required to file an income tax return check here $\qquad$ and attach copies of your most recent year end statements showing social security SSA1099, pension 1099R, income from all other sources W2s and 1099s. And fill out form 8821.

* Copy of letter from Social Security stateing you are disabled.

I swear, under penalty of perjury, that all the above is a correct and accurate accounting of my financial condition to the best of my knowledge. I further authorize any agency or financial institution to release information about me or copies of my records to any agent of Northfield. I release all persons whomsoever from any liability resulting from the release of this information.

## I realize that any misrepresentation or omission will result in a denial of my application.

Signature: $\qquad$ Date: $\qquad$
Print Name: $\qquad$
Signature: $\qquad$ Date: $\qquad$
Print Name: $\qquad$

| Form <br> 8821 <br> (Rev. January 2021) <br> Department of the Treasury Internal Revenue Service | Tax Information Authorization <br> Go to www.irs.gov/Form8821 for instructions and the latest information. <br> Don't sign this form unless all applicable lines have been completed. <br> - Don't use Form 8821 to request copies of your tax returns or to authorize someone to represent you. See instructions. |  |  |  |  | OMB No. 1545-1165 For IRS Use Only Received by: <br> Name $\qquad$ <br> Telephone $\qquad$ <br> Function $\qquad$ <br> Date |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 1 Taxpayer information. Taxpayer must sign and date this form on line 6. |  |  |  |  |  |  |  |
| Taxpayer name and address |  |  |  | Taxpayer identification number(s) |  |  |  |
|  |  |  |  | Daytime telephone number | Plan number (if applicable) |  |  |
| 2 Designee(s). If you wish to name more than two designees, attach a list to this form. Check here if a list of additional designees is attached |  |  |  |  |  |  |  |
| Name and address |  |  |  |  |  |  |  |
|  |  |  | PTIN |  |  |  |  |
|  |  |  | Telephone No. |  |  |  |  |
|  |  |  | Fax No. |  |  |  |  |
| Check if to be sent copies of notices and communications $\quad \square$ |  |  | Check if new: Address $\square$ Telephone No. $\square$ Fax No. $\square$ |  |  |  |  |
| Name and address |  |  | CAF No. |  |  |  |  |
|  |  |  | PTIN |  |  |  |  |
|  |  |  | Telephone No. |  |  |  |  |
|  |  |  | Fax No. |  |  |  |  |
| Check if to be sent copies of notices and communications $\quad \square$ |  |  | Check if new: Address $\square^{\text {- }}$ Telephone No.---------------------- $\square^{\text {Fax }}$ |  |  |  |  |

3 Tax information. Each designee is authorized to inspect and/or receive confidential tax information for the type of tax, forms, periods, and specific matters you list below. See the line 3 instructions.By checking here, I authorize access to my IRS records via an Intermediate Service Provider.

| (a) <br> Type of Tax Information (Income, <br> Employment, Payroll, Excise, Estate, Gift, <br> Civil Penalty, Sec. 4980 P Payments, etc.) | (b) <br> Tax Form Number <br> (1040, 941, 720, etc.) | (c) <br> Year(s) or Period(s) | (d) <br> Specific Tax Matters |
| :---: | :---: | :---: | :---: |
|  |  |  |  |
|  |  |  |  |

4 Specific use not recorded on the Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions. If you check this box, skip line 5

5 Retention/revocation of prior tax information authorizations. If the line 4 box is checked, skip this line. If the line 4 box isn't checked, the IRS will automatically revoke all prior tax information authorizations on file unless you check the line 5 box and attach a copy of the tax information authorization(s) that you want to retain
To revoke a prior tax information authorization(s) without submitting a new authorization, see the line 5 instructions.

6 Taxpayer signature. If signed by a corporate officer, partner, guardian, partnership representative (or designated individual, if applicable), executor, receiver, administrator, trustee, or individual other than the taxpayer, I certify that I have the legal authority to execute this form with respect to the tax matters and tax periods shown on line 3 above.

- IF NOT COMPLETED, SIGNED, AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.
- DON'T SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.

| Signature | Date |
| :--- | :--- |
| Print Name | Title (if applicable) |
| Privacy Act and Paperwork Reduction Act Notice, see the instructions. | Cat. No. 11596P |

USE THIS FORM IF YOUR PROPERTY IS HELD IN A TRUST, OR IF YOU HOLD EQUITABLE TITLE OR A LIFE ESTATE
TYPE OR PRINT


I am eligible for a property tax credit, exemption or tax deferral against the property for which a Permanent Application, Form PA-29, or Tax Deferral Application, Form PA-30, has been made, and do qualify as the owner of the property under RSA 72:29, VI, based upon the following: (check one)

## Grantor/Revocable Trust

## Equitable Title holder or

## Beneficial interest for life (Life estate owner)

The appropriate document must be supplied:
(a) A Trust instrument as defined in RSA 564-B:1-103 (20);
(b) A Certification of Trust prepared in accordance with RSA 564-B:10-1013; or
(c) A deed or other legal document showing the assigned ownership.

Legal Name of Trust (if different than above):

## All documents submitted shall be handled to protect the privacy of the applicant.

Explanation or additional details:

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.
X

| SIGNATURE (IN INK) |
| :--- |
| $X$ |


| PRINT NAME |  |  |
| :--- | :--- | :--- |
| DATE |  |  |
|  |  |  |

TELEPHONE NUMBER

| WHO | To be completed by property owners to establish their status as grantor of the property to a revocable trust, <br> MUST <br> FILE |
| :--- | :--- |
| or holding equitable title or the beneficial interest for life in the property. RSA $72: 29$, VI. For purposes of <br> RSA $72: 28,28-b, 28-c, 29-a, 30,31,32,33,35,36-a, 37,37-a, 37-$ b, $38-a, 39-a, 62,66$, and 70, the <br> ownership of real estate, as expressed by such words as "owner," "owned," or "own," shall include those <br> who have placed their property in a grantor/revocable trust or who have equitable title or the beneficial <br> interest for life in the subject property. |  |
| WHEN <br> TO <br> FILE | This completed form shall be submitted with the Permanent Application, Form PA-29 (RSA 72:33), for <br> property tax credit or exemption, or the Tax Deferral Application, Form PA-30 (RSA $72: 38-a), ~ t o ~ t h e ~ l o c a l ~$ <br> municipal assessing officials of the City/Town in which such application is filed. The completed Form PA-33 <br> becomes a permanent document and does not need to be re-filed unless the status of the trust or life estate <br> is changed or altered. |

## PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS

DUE DATE APRIL 15 PRECEDING THE SETTING OF THE TAX RATE

| STEP 1 <br> OWNER AND APPLICANT NAME AND ADDRESS | OWNER AND APPLICANT INFORMATION |
| :---: | :---: |
|  | OWNER <br> If required, is a PA-33 on file? <br> APPLICANT'S FIRST NAME <br> MI <br> PHONE NUMBER <br> MAILING ADDRESS <br> IS THIS YOUR PRIMARY RESIDENCE?  NO |
| STEP 2 VETERANS' TAX CREDITS AND EXEMPTION | VETERAN'S INFORMATION |
|  | 1. APPLICANT IS THE: Veteran Spouse Surviving Spouse <br> 2. APPLYING FOR: Veterans' Tax Credit (RSA 72:28) Standard (\$50) / Optional (\$51 up to \$750) All Veterans' Tax Credit (RSA 72:28-b) If Adopted by Town Standard (\$50) / Optional (\$51 up to \$750) Tax Credit for Service-Connected Total Disability (RSA 72:35) Standard (\$700) / Optional (\$701 up to \$4,000) Tax Credit for Surviving Spouse (RSA 72:29-a "...of any person who was killed or died while on active duty...") Tax Credit for Combat Service (RSA 72:28-c) If Adopted by Town (\$50 up to \$500) Certain Disabled Veterans (Exemption) (RSA 72:36-a) <br> 3. Veteran's Name $\square$ Dates of Military Service Enter (MMDDYYYY) <br> 4. Date of Entry <br> 5. Date of Discharge/Release (if applicable) <br> SA 72:32) <br> IF A VETERAN OF ALLIED COUNTRY: (RSA 72:32) <br> 6. Name of Allied Country Served in <br> 7. Branch of Service $\square$ $\square$ <br> 9. Does any other eligible Veteran own interest in this property? <br> 8. Please Check One. <br> YES <br> NO <br> If YES, provide name $\square$ US Citizen at time of entry into Service Alien but resident of NH at time of entry into Service |
| STEP 3 EXEMPTIONS | STANDARD EXEMPTIONS |
|  | 10. $\square$ Elderly Exemption (Must be 65 years of age on or before April 1 of year for which exemption is claimed) (RSA 72:39-a) (Enter numbers only MMDDYYYY) 10a. Applicant's Date of Birth $\square$ 10b. Spouse's Date of Birth $\square$ <br> 11. $\square$ Improvements to Assist Persons with Disabilities (RSA 72:37-a) <br> 12. $\square$ Blind Exemption (RSA 72:37) |
|  | LOCAL OPTIONAL EXEMPTIONS (If adopted by city/town) |
|  | 13. $\square$ Deaf Exemption (RSA $72: 38-\mathrm{b})$ $\square$ Electric Energy Storage Systems Exemption (RSA 72:85) <br> $\square$ Disabled Exemption (RSA $72: 37-b)$ $\square$ Wind-Powered Energy Systems Exemption (RSA 72:66)  <br> $\square$ Solar Energy Systems Exemption (RSA $72: 62)$ $\square$ Woodheating Energy Systems Exemption (RSA $72: 70)$  <br> $\square$ Renewable Generation Facilities and Electric Energy Storage Systems Exemption (RSA 72:87)   |
| STEP 4 RESIDENCY | 14. NH Resident for One Year preceding April 1 in the year in which the tax credit is claimed (Veterans' Tax Credit) NH Resident for Five Consecutive Years (Deaf) or At least Five Years (Disabled) preceding April 1 in the year the exemption is claimed NH Resident for Three Consecutive Years preceding April 1 in the year the exemption is claimed (Elderly Exemption) |
| STEP 5 OWNERSHIP | 15. Do you own 100\% interest in this residence? $\bigcirc$ Yes $\bigcirc$ No If NO, what percent (\%) do you own? $\square$ |
| STEP 6 SIGNATURES | Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete. |
|  | SIGNATURE (IN INK) OF PROPERTY OWNER DATE |
|  | SIGNATURE (IN INK) OF PROPERTY OWNER DATE |

## MUNICIPAL AUTHORIZATION - TO BE COMPLETED BY MUNICIPAL ASSESSING OFFICIALS



A photocopy of this Form (Pages 1 and 2) or Form PA- $\mathbf{3 5}$ must be returned to the property owner after approval or denial.
The following documentation may be requested at the time of application in accordance with RSA 72:34, II.
$\square$ * List of assets, value of each asset, net encumbrance and net value of each asset.State Interest and Dividends Tax Form.
$\square$ * Statement of applicant and spouse's income.* Property Tax Inventory Form filed in any other town.
$\square$ * Federal Income Tax Form.

* Documents are considered confidential and must be returned to the applicant once a decision is made on the application.

Municipal Notes
$\square$

| PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | DATE |
| :---: | :---: | :---: |
| PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | DATE |
| PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | DATE |
| PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | DATE |
| PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL | DATE |

## GENERAL INSTRUCTIONS

| WHO MAY FILE | Applicant must be qualified as of April 1 of the year the exemption and/or tax credit is claimed. Financial qualifications required for certain exemptions must be met by the time of application. An applicant must have resided in this state for at least one year preceding April 1 in the year in which the veterans' tax credit is claimed. An applicant must have resided in this state for at least three years preceding April 1 in the year for which the elderly exemption is claimed and five years in which the deaf or disabled exemption is claimed. The terms owner, own or owned, shall include those persons who hold grantor/revocable trust, equitable title, or beneficial interest for life in the subject property. |  |  |
| :---: | :---: | :---: | :---: |
| WHERE TO FILE | Form PA-29 must be filed with the municipal assessing officials of the city/town where the tax credit and/or exemption is being requested. |  |  |
| WHEN TO FILE | Form PA-29 must be filed by April 15 preceding the setting of the tax rate. The municipal assessing officials shall send written notice to the taxpayer of their decision by July 1 prior to the date of notice of tax. Failure of the municipal assessing officials to respond shall constitute a denial of the application. Example: If you are applying for a tax credit and/or an exemption for the 2023 property taxes, which are due no earlier than December 1, 2023, you have until April 15, 2023, to file this form. The municipal assessing officials have until July 1 to send notice of their decision. Failure of the municipal assessing officials to respond shall constitute a denial of the application. A late response or failure to respond by municipal assessing officials does not extend the appeal period. Date of filing is when the completed application is either hand-delivered to the municipality, postmarked by the post office, or receipted by an overnight delivery service. <br> Pursuant to RSA 72:33, I-a, "If any person, otherwise qualified to receive an exemption or credit, shall satisfy the selectmen or assessors that he or she was prevented by accident, mistake, or misfortune from filing a permanent application or amended permanent application on or before April 15 of the year in which he or she desires the exemption to begin, said officials may receive the application at a later date and grant an exemption or credit for that tax year..." |  |  |
| APPEAL PROCEDURE | If an application for a property tax exemption and/or tax credit is denied by the municipality, an applicant may appeal in writing on or before September 1 following the date of notice of tax under RSA 72:1-d, to the NH Board of Tax and Land Appeals (BTLA) or to the Superior Court in the county where the property is located. Example: If you were denied an exemption from your 2022 property taxes, you have until September 1, 2023, to appeal. Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301; their website at www.nh.gov/btla; or by calling (603) $271-2578$. Be sure to specify EXEMPTION APPEAL. |  |  |
| TAX CREDITS | Tax credits approved will be deducted from the property tax amount. |  |  |
| EXEMPTIONS | Tax exemptions approved are deducted from the amount of the property owner's total assessed value prior to the calculation of tax due. |  |  |
| BLIND EXEMPTION RSA 72:37 | \$15,000 (unle increase) is su valuation. | e municipality votes an cted from the assessed | Every inhabitant owning residential real estate, who is legally blind, as determined by the Administrator of Blind Services of the Vocational Rehabilitation Division of the Department of Education. |
| ELDERLY EXEMPTIONS RSA 72:39-a | Applicant must have resided in this state for at least three consecutive years preceding April 1 in the year which the exemption is claimed. Property must be: owned by a resident; or owned by a resident jointly or in common with the resident's spouse, either of whom meets the age requirement for the exemption claimed; or owned by a resident jointly or in common with a person not the resident's spouse, if the resident meets the applicable age requirement for the exemption claimed; or owned by a resident, or the resident's spouse, either of whom meets the age requirement for the exemption claimed, and when they have been married for at least five years. <br> Property cannot have been transferred to the applicant from a person under the age of 65 , and related to the applicant by blood or marriage, within the preceding five years. <br> Property must meet the definition of residence per RSA 72:39-a, I(c), which includes the housing unit, which is the person's principle home and related structures such as a detached garage or woodshed. It does not include attached dwelling units and unattached structures used or intended for commercial or other non-residential purposes. If fractional interest is owned, see RSA 72:41, Proration. |  |  |
| ELDERLY, DEAF and DISABLED FINANCIAL QUALIFICATIONS RSA 72:39-a | INCOME LIMITATION | Includes: Income from any source including Social Security or pension. | Excludes: <br> Life insurance paid on the death of an insured; <br> Expenses and costs incurred in the course of conducting a business enterprise; Proceeds from the sale of assets. |
|  | ASSET <br> LIMITATION | Includes: <br> The value of all assets, tangible and intangible. | Excludes: <br> The value of the person's actual residence and the land upon which it is located up to the greater of 2 acres or the minimum single family residential lot size specified in the local zoning ordinance. <br> The value of any good faith encumbrances. |
| ADA COMPLIANCE | Individuals who need auxiliary aids for effective communication in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964. |  |  |


| TYPE OF TAX CREDIT or EXEMPTION | AMOUNT GRANTED | WHO MAY APPLY |
| :---: | :---: | :---: |
| VETERANS' TAX CREDIT RSA 72:28 | \$50 (\$51 up to \$750 upon adoption by the municipality), is subtracted from the taxes due on the applicant's RESIDENTIAL property, occupied as the veteran's principle place of abode. For Veterans' surviving spouse: See RSA 72:28, III. For Proration: See RSA 72:30 | Every resident of NH who is a veteran, as defined in RSA 21:50, and served not less than 90 days on active service in the armed forces in any of the qualifying wars or armed conflicts listed in RSA 72:28, and continues to serve or was honorably discharged; or the spouse or surviving spouse of such resident. (NOTE: 'Under Honorable Conditions' does not qualify.) |
| ALL VETERANS' TAX CREDIT RSA 72:28-b Must be adopted by Municipality |  | Every resident of NH who is a veteran, as defined in RSA 21:50, and served not less than 90 days on active service in the armed forces and continues to serve or was honorably discharged; or the spouse or surviving spouse of such resident. (NOTE: 'Under Honorable Conditions' does not qualify.) |
| SURVIVING SPOUSE <br> TAX CREDIT <br> RSA 72:29-a | \$700 (\$701 up to \$2,000 upon adoption by the municipality per RSA 72:27-a), is subtracted from taxes due on the applicant's property, residential or other. | The surviving spouse of any person who was killed or died while on active duty in the armed forces, as listed in RSA 72:28, so long as the surviving spouse remains single. |
| SERVICE-CONNECTED <br> TOTAL DISABILITY <br> TAX CREDIT <br> RSA 72:35 | $\$ 700$ (\$701 up to \$4,000 upon adoption by the municipality pursuant to RSA 72:27-a), is subtracted from the property taxes due on the applicant's residential property. | Any person who: <br> - Has been honorably discharged or an officer honorably separated from military service and who has a total and permanent service-connected disability; <br> - Is a double amputee or paraplegic because of service-connected injury; or <br> - Is the surviving spouse of above qualified veteran and remains single. |
| TAX CREDIT FOR COMBAT SERVICE RSA 72:28-C Must be adopted by Municipality | $\$ 50$ up to $\$ 500$ upon adoption by the municipality pursuant to RSA 72:27-a is subtracted from the property taxes due on the applicant's residential property. | Every resident of this state engaged at any point during the taxable period in combat service as a member of the NH National Guard or a reserve member of the United States Armed Forces called to active duty. The application for the tax credit must be accompanied by the service member's military orders. |
| CERTAIN DISABLED VETERANS - EXEMPTION RSA 72:36-a <br> "...shall be exempt from all taxation on said homestead..." | Any person who: <br> - Has been discharged under conditions other than dishonorable, or an officer who has been honorably separated from military service; <br> - Owns a specially adapted homestead which has been acquired with the assistance of the Veterans Administration or by using proceeds from the sale of any previous homestead which was acquired with the assistance of the Veterans Administration; and <br> - Is 100 percent permanently and totally disabled as prescribed in 38 C.F.R 3.340 , total and permanent total ratings and unemployability; or is a double amputee of the upper or lower extremities or any combination thereof, or paraplegic, as the result of service connection; or has blindness of both eyes with visual acuity of $5 / 200$ or less, as the result of service connection. <br> The surviving spouse of an eligible veteran may also apply. Satisfactory proof of such service connection disability must be furnished to the assessor. |  |

A list of the Veterans' qualifying medals and discharge papers can be found at: http://www.revenue.nh.gov/mun-prop/property/exemptions-tax-credits.htm

| IMPROVEMENTS TO ASSIST PERSONS WITH DISABILITIES AND THE DEAF |  |  |
| :---: | :--- | :--- |
| EXEMPTION | AMOUNT OF EXEMPTION | WHO MAY APPLY |
| IMPROVEMENTS TO ASSIST <br> PERSONS WITH DISABILITIES <br> RSA 72:37-a <br> DEAF OR SEVERELY HEARING <br> IMPAIRED PERSONS <br> RSA 72:38-b | The value of improvements made for the <br> purpose of assisting a person with a <br> disability or deafness is deducted from <br> the assessed value of the residential real <br> estate. | Any person owning residential real estate upon which he resides and to which <br> he has made improvements for the purpose of assisting a person with a <br> disability or deafness who also resided on such real estate. |
| OPTIONAL EXEMPTIONS BELOW MUST BE ADOPTED BY THE MUNICIPALITY BEFORE ANYONE MAY APPLY |  |  |

OPTIONAL EXEMPTIONS BELOW MUST BE ADOPTED BY THE MUNICIPALITY BEFORE ANYONE MAY APPLY continued

| EXEMPTION | AMOUNT OF EXEMPTION | WHO MAY APPLY |
| :--- | :--- | :--- |
| SOLAR ENERGY SYSTEMS <br> RSA $72: 61$ and RSA $72: 62$ | Determined by vote of the municipality <br> pursuant to RSA 72:62. | Any person owning real property equipped with a solar energy heating or <br> cooling system, as defined in RSA $72: 61$. |
| WOODHEATING ENERGY <br> SYSTEMS <br> RSA 72:69 and RSA 72:70 | Determined by vote of the municipality <br> pursuant to RSA 72:70. | Any person owning real property equipped with a woodheating energy system, <br> as defined in RSA $72: 69$. |
| WIND-POWERED ENERGY <br> SYSTEMS <br> RSA 72:65 and RSA 72:66 | Determined by vote of the municipality <br> pursuant to RSA 72:66. | Any person owning real property equipped with a wind-powered energy system, <br> as defined in RSA $72: 65$. |
| ELECTRIC ENERGY <br> STORAGE SYSTEMS <br> RSA 72:84 and RSA 72:85 | Determined by vote of the municipality <br> pursuant to RSA 72:85. | Any person owning real property equipped with an electrical energy storage <br> system, as defined in RSA $72: 84$. |
| RENEWABLE GENERATION <br> AND ELECTRIC ENERGY <br> STORAGE SYSTEMS <br> RSA 72:87 | Determined by vote of the municipality <br> pursuant to RSA 72:87. | Any person owning a renewable generation facility, as defined in RSA $72: 73$, <br> an electrical energy storage system, as defined in RSA $72: 84, ~ a n d ~ a n y ~ p e r s o n ~$ <br> or facility qualifying for exemption as defined in RSA 72:87. |

