

# APPLICATION FOR HOMESTEAD EXEMPTION

Title 36 MRSA Sections 681-689

**INSTRUCTIONS:** Completed forms must be filed with your local assessor by April 1. Forms filed after April 1 of any year will apply to the subsequent year tax assessment. See reverse for additional instructions

## SECTION 1: CHECK ALL THAT APPLY

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| A. I am a legal resident of the State of Maine   | <input type="checkbox"/> | <input type="checkbox"/> |
| B. I have owned homestead property in Maine for at least the past 12 months.<br>(1) If you owned a homestead in another municipality within the past 12 months, state the municipality where located: _____          | <input type="checkbox"/> | <input type="checkbox"/> |
| C. I declare this homestead is my permanent place of residence and the only property for which I have claimed a homestead exemption.<br>(Summer camps, vacation homes and 2 <sup>nd</sup> residences do not qualify) | <input type="checkbox"/> | <input type="checkbox"/> |

**IF YOU HAVE NOT ANSWERED YES TO ALL QUESTIONS, STOP HERE**

You must meet all three of these requirements to qualify for a homestead exemption under the terms of the homestead exemption statute

## SECTION 2

- Names of all Property Owners (names on your tax bill): \_\_\_\_\_  
\_\_\_\_\_
- Physical location of Homestead property (i.e. 14 Maple St.): \_\_\_\_\_  
City/Town \_\_\_\_\_ Telephone #: \_\_\_\_\_
- Mailing Address, if different from above: \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## SECTION 3: CLAIM OF RESIDENCY IN THE MUNICIPALITY IS BASED ON ONE OR MORE OF THE FOLLOWING:

- |  | YES                      | NO                       | N/A                      |
|--|--------------------------|--------------------------|--------------------------|
| ❖ I am a registered voter in the municipality.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ I pay Motor Vehicle Excise Tax in the municipality.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ The place of legal residence on my resident fishing and/or hunting license is the same as the above homestead address. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ❖ The address on my driver's license is the same as the above address.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(If you answer "No" to any question, please explain on a separate sheet. N/A means Not Applicable)

I (we) hereby declare, aware of penalties for perjury, that the answers to the above are, to the best of my/our knowledge and belief, true, correct and complete. A person who knowingly files false information for the purpose of obtaining a homestead exemption is guilty of a criminal offense.

Signature of Homestead Owner(s) \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ Date: \_\_\_\_\_