



TOWN OF LANCASTER
SENIOR CITIZEN PROPERTY TAX
WORK-OFF PROGRAM

Program Application Form

This application is not open to Public Inspection

SECTION I

Part A: Applicant Eligibility

Name of Applicant: _____ Date of Birth: _____

Property Location: _____ Lancaster, MA

Mailing Address (if different): _____ Telephone #: _____

Email: _____

Do you occupy (as your domicile) the property: Yes or No (please circle)

Are you the assessed owner of the property: Yes or No (please circle)

(Most recent tax bill must be submitted with application)

Are you single or married: _____

Form of ownership: If the property is subject to a trust, the applicant must have a legal title, (i.e., be one of the trustees)

____ Sole Owner ____ Co-Owner with Spouse ____ Co-Owner with others, indicate: _____

____ Trustee of Trust ____ Life Estate

Do you own any other real estate besides the property location listed above: Yes or No (please circle)

Part B: Gross receipts from ALL SOURCES for the previous calendar year *(You must provide all sources of income for you including other household members; adult children, roommates and partners)*

The Town of Lancaster considers all financial information submitted **CONFIDENTIAL**. Verification documents must be provided for all sources of income.

	Applicant & Spouse	Other Household Members
Wages, Salaries and other Compensation.....		
Interest from financial institutions (banks and/or credit unions).....		
Dividends - as reported on IRS Form 1099-DIV.....		
Retirement Benefits (Social Security, Railroad, Federal, etc.).....		
Supplemental Security Income (SSI).....		
Other Pensions and Retirement Allowances.....		
Net Profits from Business.....		
Rental Income.....		
IRA Distributions.....		
Other Income (ie. Veterans benefits).....		
TOTALS:		



**TOWN OF LANCASTER
SENIOR CITIZEN PROPERTY TAX
WORK-OFF PROGRAM**

Part C: Assets (Whole Estate) – Whole estate means all assets to which the applicant has legal title and access as sole, joint owner or trustee that contribute to their total worth. **The value of the domicile and one registered vehicle will not be included.** The Town of Lancaster considers all financial information submitted **CONFIDENTIAL**. Verification documents must be provided for all assets (ie. Tax bills, bank statement, etc.)

Real Estate:	Value*
Domicile (Legal Residence):	_____
Other: (address)_____	_____
Personal Estate:	
Bank Accounts: Checking, Savings, CDs (Name & Address of Bank)	
_____	_____
_____	_____
IRAs, Annuities, 401Ks, Pensions, Stocks, Bonds, Securities, etc.:	
_____	_____
_____	_____
Motor Vehicles & Trailers: Year, Make & Model	
_____	_____
_____	_____
Other Non-exempt Personal Property: Kind & Description	
_____	_____
	TOTAL: _____

***Values should be as of the date of application filing**

SECTION II
Part A: Work Experience

Have you previously participated in this program: Yes or No (please circle)
If you answered YES please indicate department:_____

If staying in current placement, skip to Section III



**TOWN OF LANCASTER
SENIOR CITIZEN PROPERTY TAX
WORK-OFF PROGRAM**

Please list your work experience, skills, interests and other qualifications to be considered in the job placement:

What kind of work would you be most interested in performing?

Do you have any medical conditions or special accommodations which would affect the type of work you could perform?

Please explain:

Part B: Job placements may be available in a variety of Town Departments. Please indicate in which departments you are most interested in working:

Town Offices (Assessors, Collector, Community & Development, Town Clerk) Community Center
 Senior Center DPW Fire Department Library
 Other; please indicate: _____

SECTION III
Other

Please provide any other information relevant to your application that you would like to be considered:

List any unexpected circumstances which may prevent you from qualifying for the Work-Off Program (ie. Medical expenses, household repairs, etc.)



TOWN OF LANCASTER
SENIOR CITIZEN PROPERTY TAX
WORK-OFF PROGRAM

SECTION IV
Acknowledgement/Signature

Please read the following statements. By signing below you agree to the following:

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, this application and all accompanying documents and statements are true, correct and complete. I attest that I have revealed ALL sources of income including any rent or financial/monetary assistance from family or friends living at my residence. I understand that incomplete, false, or inaccurate information may result in the rejection of this application and that false information may result in my dismissal if selected for participation in this program.

I understand that submitting this application does not guarantee acceptance into the Lancaster Senior Citizen Property Tax Work-Off Program.

I understand that if approved for participation:

I may NOT start work until I am in receipt of written notification from the Town informing me of my acceptance in the program and my assigned position. I may earn a maximum credit of \$1,500.00 per year, per household which will only be applied as a credit/abatement to the **actual** tax bills for the applicable fiscal year and the abatement may be divided between the third and fourth quarter bills. All completed hours must be certified to the assessors before the abatement is applied to the actual tax bills therefore, I must turn in signed timesheets to the Assessors Office by the 5th of each month for hours worked the previous month and **ALL** hours must be completed, approved and submitted on or before 12:00PM on October 31st. The amount of the property tax reduction I receive under this statute is not considered income or wages for the purposes of state income tax withholding, unemployment compensation or workmen's compensation. The tax reduction is, however, considered income for purposes of federal income tax, therefore an IRS Form W-2 will be provided to the program participant.

I also understand that as a participant of the Senior Citizen Property Tax Work-Off Program, I **MUST** observe the rules of confidentiality. Confidentiality means that anything you see or hear during the course of your work assignment **MUST NOT** be shared with anyone.

The Town of Lancaster reserves the right to discontinue the participant's participation in the program if the Town deems the participant's participation to be detrimental to the participant, the program, or the Town.

Applicant Signature: _____ **Date:** _____

Return completed** application and ALL required verification documents to: Assessors Office
701 Main St. Suite 3
Lancaster, MA 01523

****Applications are deemed complete when all supporting verification documents are provided****

Applications will not be accepted unless all supporting documentation is submitted

ASSESSORS USE ONLY

The applicant: _____ Meets _____ Does **NOT** Meet the qualifications for the Property Tax Work-Off Program

Reason for Denial: _____

Placement: _____

Staff Signature: _____ Date: _____

Notification Letter Sent (date): _____

COA Approval (if applicable): _____ Date: _____