

## Town of Hudson Assessing Department

12 School St., Hudson, NH 03051 / Phone: (603) 886-6009 Fax: (603) 598-6481

**DEADLINE TO FILE:** April 15, 2025

Disabled

Eligibility:

Exemption

The Disabled Exemption from property tax in the Town of Hudson shall apply to any person under the age of 65 who is eligible under Title II or Title XVI of the Federal Social Security Act for benefits to the disabled and is applied on a yearly basis.

<u>Current Exemption Amount</u>: \$132,000- property valuation reduction

Qualifications

RSA 72:37b

as the principal place of abode. 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.

The Exemption may be applied only to the property occupied by the Disabled

Applicant must have been a New Hampshire resident for five (5) years, consecutively: Prior to April 1st.

Applicant must have owned the residence by April 1st individually or jointly: Or, if the residence is owned by a spouse, they must have been married to each other for at least five (5) consecutive years.

Applicant Assets must not exceed:

\$160,000

Excluding the value of the dwelling, and up to (2) acres of land.

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Applicant, if Single, must have a Gross Income less than: \$ 50,000 Net, if a business.

If Married, must have a combined Gross Income less than: \$ 60,000 Net. if a business.

## Net Income is to be determined by:

Deducting from all monies received from any source whatsoever, the amount of any of the following, or the sum thereof:

- A. Life insurance paid on the death of the insured
- B. Expenses and costs incurred in the course of conducting a business enterprise
- C. Proceeds from the sale of assets

## Applicant must bring in copies of the following:

- Proof of Age
- Social Security 1099 Benefit Statement(s) and current Benefit Letter
- W-2's, 1099's, etc If Applicable for 2024
- End-of-year 2024 Bank Statement(s) from All Banks/All Pages -Including Checking, Savings, Stocks, Bonds, Certificates of Deposit, Money Markets, Mutual Funds, IRAs, etc.
- Dividend Statement(s) & Interest Income Statement(s) for 2024
- 401k Statement(s) for December 2024
- Federal Income Tax Return for 2024
- Trust Document & Statement of Qualification Form If Applicable

TOWN OF HUDSON-APPLICATION FOR DISABLED EXEMPTION (Page 1 of 2)

RSA 72:37b DEADLINE TO FILE: APRIL 15, 2025

Name of Applicant:	Name of Spouse:		
Property in a Trust? Yes: No:	Name of Trust: Full copy must be provided		
Applicant's Date of Birth:	Spouse's Date o	f Birth:	
Address:	Telephone: Email (optional):		
Map/Lot:			
Marital Status:	Single:	Married: 🗆 W	/idow(er):
Residence is Owned: (Please check applicable box to the right)	Individually:  With Others:  Joint Tenants:  % Owned:	With In Trust: 0	Spouse:
I have lived in New Hampshire for consecutive years since:	Year:		
Previous Address, if less than five (5) years in New Hampshire:			
Have you ever received a Disabled Exemption from any <u>other</u> community in New Hampshire, or other state(s)?	Yes: ☐ No: ☐  If yes, name of other community:		
- INCOME INFORMATION - (Enter in Ye	arly Amounts) -	APPLICANT	SPOUSE
Social Security - for 2024 (Gross Amount): (Includes Supplemental Security Income-SSI		\$	\$
Pension & Retirement - for 2024: (includes VA compensation)		\$	\$
Wages - for 2024:			
(Include W-2 & 1099-MISC, etc.):		\$	\$
Other Income - for 2024: (Includes Unemployment, IRA & 401K Distributions, Annuities etc.)		\$	\$
Interest Income - for 2024:		\$	\$
Dividends Received - for 2024: (Includes any Stock, Bonds, Capitals Gains, etc.)		\$	\$
Other Income Received - for 2024: (Includes any financial assistance from others, IE: NH Housing assistance)		\$	\$
Rental Income Received - for 2024: (Includes any financial assistance from persons living in household)		\$	\$
Other Income <u>not</u> listed above - for 2024: (IE: lottery & gambling winnings, Stimulus)		\$	\$
Total 2024 Income:		\$	\$
Verification of the above MUST be submitted			
Life Insurance Payment(s) Received? If yes, amount?		Yes: ☐ No: ☐	\$
Are you required to file an Interest and Dividend Tax Return to the State of New Hampshire?		Yes:	No:
Are you required to file an IRS Tax Return for true copy of 2024 return	2024? provide full and	Yes: □	No: □

## TOWN OF HUDSON-APPLICATION FOR DISABLED EXEMPTION (Page 2 of 2)

- ASSET INFORMATION - (Enter in Yearly A	mounts) -	Single	Multi-	
Type of property for which exemption is being cla If multi-family, in which unit # do you reside?	imed:	Family:	Family:  Unit #:	
VALUE OF FUNDS AS OF 12/31/20	124	Type:		
VALUE 01 1 01100 A0 01 12/01/20		Institution:		
		Value:	\$	
List the market value of Stocks, Bonds, Certificate	e of Denosit	Type: Institution:		
Money Markets, Mutual Funds, IRAs, 401Ks, Whole Life ins, etc.  (Use additional pages if necessary)		Value:	\$	
		Type:		
		Institution:		
		Value:	\$	
VALUE OF BANK ACCOUNTS AS OF 12	/31/2024	Checking:		
		Institution:	•	
List current balances of all bank accounts in your		Balance:	\$	
List current balances of <u>all</u> bank accounts in your (and your spouse's) name – if applicable):		<u>Savings</u> : Institution:		
(and your spouse sy hame – It applicable).		Balance:	\$	
You must submit copies of your year-end bank sta	atement(s)	Other:	Ψ	
from all banks including all pages.		Institution:		
		Balance:	\$	
VALUE OF VEHICLES AS OF 12/31/2	Make:			
VALUE OF VEHICLES AS OF 12/31/2	2024	Model:		
		Year:		
Please provide the following vehicle information:		Mileage:	•	
Tributor provide the following ventors information.		Est. Value:	\$	
Please call dealer or use Kelley Blue Book to get the estimated		Make:   Model:		
value.		Year:		
		Mileage:	·	
( <u>Includes</u> Cars, Trucks, Boats, RV's, Motorcycles,	etc.)	Est. Value:	\$	
Other Tangible Assets of value				
V-16 - do- of the character strict to 0.1 1/4 1. T-4-1	0004 44	Est. Value:	\$	
Verification of the above MUST be Submitted - Total	2024 Assets:	\$	\$ made and the second	
OTHER REAL ESTATE		<u> </u>		
Current mortgage on your Hudson, NH residence?		Balance:	\$	
Bank holding mortgage? Please provide copy of mortg		Bank Name:		
		Yes: □	No:	
Do you own any other real estate other than your h		Property Type:		
residence? (IE: Home, Mobile Home, Vacant Land) If yes, please provide a copy of the most recent tax bill for these properties.		Town & State:		
[20] - 18 : 18 : 18 : 18 : 18 : 18 : 18 : 18		Est. Value:	\$	
I swear, under the 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 the Town of Hudson Assessing office. I release all persons whomsoever from any liability arising out of or resulting from the release of this information.				
	Date:			
Applicant's Signature:	pouse's Signa	ture:	Hadatad 4047/2024	