

RESIDENTIAL EXEMPTION
THE COMMONWEALTH OF MASSACHUSETTS

Do not write in this space.
Date application received:

FISCAL YEAR
2020

BARNSTABLE
NAME OF CITY OR TOWN

APPLICATION FOR RESIDENTIAL EXEMPTION

MUST BE FILED NO LATER THAN 3 MONTHS AFTER THE DATE THE ACTUAL TAX BILL IS ISSUED.

ALL TAXPAYER INFORMATION ON THIS FORM MUST BE COMPLETED IN FULL
AND REQUIRED DOCUMENTATION ATTACHED TO BE CONSIDERED FOR THE RESIDENTIAL EXEMPTION.
APPLICATIONS ARE FOR THE 2020 FISCAL YEAR BEGINNING JULY 1, 2019.

PARCEL ID# _____

The undersigned being aggrieved by the failure to receive a residential exemption on real estate situated at

_____ for fiscal year **2020** hereby applies for such an exemption.
Number # _____ Street _____

STATEMENT OF FACTS

1) Name(s) of record owner(s) _____

2) Name of Applicant(s) _____

3) Social Security Number (optional) _____ Date Property Acquired: _____

4) Was this real estate ***owned and occupied*** by you as your ***principal residence*** on **January 1, 2019**? YES: _____ NO: _____

5) **Please attach a copy of the Front Page of your 2018 Federal Income Tax Return Showing the Above Real Estate Address.**
Attach the copy, skip line 6 & go to line 7. If return shows a P.O. Box, attach a copy & **1** other piece of evidence listed in line 6. If you are not required to file a tax return, submit a short written explanation why and **at least 2** pieces of other evidence in line 6.

6) Other Evidence: Copy of Driver's License (both sides) ; Copy of 2017 Federal Tax Return (front page) ;
Copy of Motor Vehicle Registration ; Copy of Gun Permit ; Copy of Other 2018 Federal Form showing address

7) List the location and type of any other residential real estate owned by you:

8) Have you received or applied for a residential exemption in any other state, city or town for this fiscal year?

YES: _____ NO: _____ If yes, where? _____
City/State

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SUBSCRIBED THIS _____ DAY OF _____, **20** _____ UNDER THE PENALTIES OF PERJURY

9) **Signature of Applicant:** _____

10) **Mailing Address** (if different than property location): _____

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GRANTED: _____ DENIED: _____ NO ACTION: _____

DATE: _____ CERTIFICATE #: _____ AMOUNT ABATED: _____

Dear Property Owner,

The Town Council has the option of enacting a residential exemption of up to 20% of the average total residential value in Barnstable every year for those property owners who maintain their primary residence in the Town of Barnstable. *Please note that this does **not** mean up to 20% of the **individual** value of each property.* Each qualified property will receive exactly the same dollar amount of exemption value, regardless of the property value, and that amount is recalculated every year. This means that a qualifying property in any one year will have that year's exemption amount subtracted from the total taxable value of the property before the tax is calculated. **Example for Last Year - FY2019:**

Original taxable value: \$ 500,000
Residential exemption: -\$ 98,270 (FY2019)
Actual taxable value: \$ 401,730

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Return the application to the **Assessing Office, 367 Main Street, Hyannis, MA 02601.**

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Phone: 508-862-4022
<http://townofbarnstable.us>

William T Garreffi
Andrew Machado
Melvin Pauze

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