

**OFFICE OF TAX ASSESSOR
TOWN OF JAMESTOWN
APPLICATION FOR ELDERLY EXEMPTION
(Answers must be typewritten or printed in ink)
APPLICATION DEADLINE - MARCH 1ST**

Date: _____ Phone Number _____

1. Name _____

2. Residence Address _____

3. When did you acquire above property? _____

4. Are you a legal resident of Jamestown? Yes _____ No _____
Have you registered to vote? Yes _____ No _____

5. Location of property: _____

6. Age _____ Birth date _____ Place of birth _____

7. Do you reside at the above address for 12 months each year? _____
If not, please explain _____

8. Single ___ Married ___ If married, name of spouse _____
Age _____

9. Names of any other joint tenants or co-tenants who occupy said
property _____

**I, THE UNDERSIGNED _____, do hereby
swear or affirm that the above information is true, correct, and
complete to the best of my knowledge and belief.**

Signature

Subscribed and sworn to before me this _____ day of _____, 200 .

**SIGNED _____
TAX ASSESSOR OR NOTARY PUBLIC**