

**APPLICATION FOR VETERAN PROPERTY TAX EXEMPTION**

36 M.R.S. § 653

Please refer to Bulletin #7 for additional information

File this application, including all required attachments with your town by April 1.

1. Name: \_\_\_\_\_ 2. Telephone: \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

4. Legal Residence: \_\_\_\_\_ 5. Date of Birth: \_\_\_\_\_

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6. Date of Entry into Armed Forces: \_\_\_\_\_ 7. Service Number/SSN: \_\_\_\_\_

8. Legal Residence on Date of Entry into Armed Forces: \_\_\_\_\_

9. Date of Discharge or Separation from Armed Forces: \_\_\_\_\_

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10. Check the box that applies:

I am 62 or older (or receiving a non service-connected total disability pension) and served in the U.S. Armed Forces during an accepted war period.

I am 62 or older (or receiving a non service-connected total disability pension) and received an Armed Forces Expeditionary Medal.

I receive a service-related total disability pension from the U.S. Government for:

Service in the U.S. Armed Forces during any Federally recognized War Period.

Injury or disease incurred in the line of duty during active military service.

VA disability pension Claim Number: C-\_\_\_\_\_

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11. Did you receive a grant from the U.S. Government for specially adapted housing as a paraplegic?

Yes  No

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12. Is the property you are requesting an exemption for in a revocable living trust with you as the beneficial owner of that trust?  Yes  No

13. Enter a description of the property (map, lot, location, etc.): \_\_\_\_\_

\_\_\_\_\_

*I hereby apply for an exemption from property tax in accordance with 36 M.R.S. § 653. No property upon which I claim tax exemption as a veteran was conveyed to me for the purpose of obtaining exemption other than from my spouse. The answers to the above questions are correct to the best of my knowledge and belief.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## GENERAL INSTRUCTIONS

If you are a Maine resident and a veteran who served in the U.S. Armed Forces, you may be eligible for a limited exemption from property tax on real estate or personal property. You qualify for an exemption if:

- 1) You served in the U.S. Armed Forces during a recognized war period (on active duty for the Vietnam Era or the Persian Gulf War) or you received an Armed Forces Expeditionary Medal; and
- 2) You will be at least 62 years old on April 1 or you are receiving a total disability pension from the U.S. Government.

Proof of eligibility is generally covered by a copy of your Certificate of Release or Discharge from Active Duty (DD Form 214 or similar form issued by the Department of Defense) or the benefit summary letter issued by the Department of Veterans Affairs ("VA"). A copy of VA Form 20-5455 may be used if you do not have a benefit summary letter.

### RECOGNIZED WAR PERIODS

- World War I - April 6, 1917 through November 11, 1918;
- World War I - (service in Russia) - April 6, 1917 through March 31, 1920;
- World War II - December 7, 1941 through December 31, 1946;
- Korean Conflict - June 27, 1950 through January 31, 1955;
- Vietnam Era - The Vietnam Era includes two qualified, overlapping periods:
  - February 28, 1961 through May 7, 1975 in the case of a veteran who served in the Republic of Vietnam during that period; and
  - August 5, 1964 through May 7, 1965 in the case of a veteran who served anywhere
- Persian Gulf War - August 2, 1990 to the date that the U.S. Government recognizes as the end of the Persian Gulf War. This period also includes Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn.
- Other Recognized Service Periods:
  - August 24, 1982 through July 31, 1984; and
  - December 20, 1989 through January 31, 1990

## SPECIFIC INSTRUCTIONS

**Line 4. Legal Residence.** Enter the municipality where your primary home is. You can have only one legal residence.

**Line 7. Service Number/SSN.** If you were issued a service number, enter that number. Otherwise, enter your Social Security Number ("SSN").

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### FOR ASSESSOR USE ONLY - CERTIFICATE OF APPROVAL OF APPLICANT'S EXEMPT STATUS

The applicant has applied for the following exemption amount:

- \$6,000 Post W.W.I       \$7,000 W.W.I       \$50,000 Paraplegic

In determining the local assessed value of the exemption, the assessor shall multiply the amount of the exemption by the ratio of current just value upon which the assessment is based.

Date Approved: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Title: \_\_\_\_\_