



DOCUMENTATION CHECKLIST

The following documents are required when applying for a Property Tax Abatement due to Poverty or Infirmity. Applicants or their advocates must make every effort to contact the appropriate individuals to gather all necessary documentation. Applicants must also make an appointment with the General Assistance Administrator to review the application for General Assistance which will be submitted to the Select Board and assist with their review.

- ✓ Complete the attached application and budget sheet for Property Tax Abatement Due to Poverty or Infirmity
- ✓ Income Verification- Provide proof of income such as pay stubs, copies of checks, child support income, income statements from Social Security, Veteran's Administration and/or DHHS
- ✓ Mortgage Documentation- All mortgage related documents for any and all mortgages for all properties owned such as applications, good faith estimates, TILA disclosures, HUD-1 form, credit checks and appraisals. Please include any closing documents and current letters or documents received from the mortgage company, foreclosure attorneys or others
- ✓ Bank Statements for the last 3 months
- ✓ Hardship letter addressed to the Kennebunk Select Board briefly outlining your current situation and the reason for your Property Tax Abatement Application

Application #	
Map/Lot:	
Date Rec'd	



TOWN OF KENNEBUNK
APPLICATION FOR PROPERTY TAX ABATEMENT
 DUE TO POVERTY AND/OR INFIRMITY

CONFIDENTIAL

A. Applicant Information

Full name: _____ Date of Birth: _____

Mailing Address: _____

Residence Address: _____

Phone number: () _____ Social Security Number: _____

Is Applicant the current property owner? Yes No

Marital Status: Married Divorced Widow/er Separated Single

B. Household Information

Full name of Spouse: _____ Date of Birth: _____

Social Security Number: _____

Please list children, from all marriages residing in the household for which applicant is legally responsible, as well as information for anyone residing in the household:

Full Name	Date of Birth	Relationship	Occupation

C. Property Information

Location of the property for which you are requesting an abatement: _____

Approximate Acreage: _____ Purchase Date: _____

How much equity do you have in the property? _____

Property use: Primary residence Business Rental

Year(s) for which abatement is requested: _____

Are there any liens upon your property at this time? If Yes, please explain: _____

D. Other Information

Have you initiated bankruptcy proceedings during any of the years for which an abatement is requested?

Has any of your property been attached or seized under legal proceedings? If Yes, identify the legal proceedings, the property involved and the present status of the case: _____

During any of the years for which abatements are requested and the 2 years prior, have you or your spouse done any of the following:

a. Placed anything of value in which you have an interest in the hands of a third person? If Yes, please describe the circumstances of the transfer: _____

b. Made any assignment of any property for the benefit of your creditors? If yes, please list the date, name and address of assignee and terms of assignment: _____

c. Sold any assets or personal property? If Yes, please indicate the estimated value, and amount received:

d. Made any gifts, other than usual presents to family members? If Yes, please list the name and address of recipient and value of the gift. If the gift was conditional please list the conditions : _____

Have you applied for an abatement in the Town of Kennebunk before? Yes No

If Yes, please provide dates applied and outcome: _____

Please note: For each year an abatement is requested you must submit the following:

- Supplementary Questionnaire
- Copies of Federal and State income tax returns, all schedules, for all household members where applicable
- W-2/Income statements for all household members

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TOWN OF KENNEBUNK
SUPPLEMENTAL QUESTIONNAIRE FOR PROPERTY TAX ABATEMENT
 DUE TO POVERTY AND/OR INFIRMITY

CONFIDENTIAL

A separate questionnaire for each year for which an abatement is requested must be completed.

Year for which the abatement is requested: _____

Property Valuation: _____

Annual Property Tax Amount: _____

Current Unpaid Tax amount: _____

A. Employment Information

Applicant's Employer Name and Address: _____

Dates of Employment (Start/End): _____

Spouse's Employer Name and Address: _____

Dates of Employment (Start/End): _____

If unemployed, please list the reason for unemployment. If unemployment is due to illness or disability, please attach a current physician's statement describing the type and length of illness or disability.

B. Asset Information

List all other real estate owned by you or other members of your household:

List all bank accounts, safe deposit boxes, CDs, bonds, trust funds, etc. you maintained alone or with someone else in the year for which the abatement is requested.

Account Type	Name of Bank	Balance

List all life insurance policies in effect for the year in which an abatement is requested.

Insurance Company	Face Amount of Policy	Current Value of Policy

List all other assets such as motor vehicles, recreational vehicles and machinery, etc.

Description	Date Acquired	Current Value

Did you apply for and receive a State Property Tax Fairness Credit from the State of Maine? Y N

If yes, amount received: _____

C. Income Information

Please list monthly (or average monthly) income from all sources, for all members of the household:

Income Source	Monthly Amount	Recipient
TANF		
SSI		
Social Security		
Veteran's Benefits		
Wages from Employment		
Unemployment Compensation		
Worker's Compensation		
Medicaid		
Business Income		
Child Support		
Alimony		
Insurance Proceeds		
Income Tax Refund		
Other Income		

D. Budget Sheet and Liability Information

Average Monthly Expense	Actual	Allowed by GA
Mortgage <i>(principal and interest)</i>		
Homeowner's Insurance		
Property Taxes		
Heat		
Electricity		
Water		
Sewer		
Cooking Fuel		
Telephone(s)		
Cable/Internet		
Food		
Clothing		
Personal Supplies		
Prescriptions		
Medical/Dental		
Life Insurance		
Medical Insurance		
Transportation <i>(gas, insurance, etc.)</i>		
Car Payments		
Loan Payments <i>(incl. credit card payments)</i>		
Child Care		
Other Basic Expenses:		

What steps do you plan to take to pay your property taxes as you move forward?

You may prepare a statement regarding your need for a tax abatement due to poverty or infirmity as you will have an opportunity to speak directly with the Board of Selectmen.

I understand that my signature on this application shall serve as authorization for the Board of Selectmen or its designee(s) to investigate the information contained in this application and supplementary questionnaire and any and all other information pertinent to making a determination on this application. I further authorize the Board of Selectmen or its designee(s) to have access to certain records, be they confidential or not, including but not limited to financial institutions, Internal Revenue Service records, Maine Department of Taxation records, medical records and reports, hospital records and reports, Veterans Administration records and reports, Department of Health & Human Services records and reports and insurance records.

I hereby certify that all of the information in this application and supplementary questionnaire(s) is true and correct to the best of my knowledge.

Applicant's Signature

Date

Co-Applicant's Signature

Date

Advocate/Preparer Signature

Date