

EXEMPTION APPLICATION DOCUMENTS CHECKLIST

* Please **DO NOT** submit original documents with your application *

Low Income Senior/Limited Income Disability

PERSONAL INFORMATION

- DEED or CERTIFICATE OF SHARES or PROPRIETARY LEASE
- **PROOF OF AGE** (Birth Certificate; Baptismal Certificate; Driver's License; Naturalization Papers; Military ID or Passport)
- **PROOF OF PRIMARY RESIDENCE** (SSA-1099, Car Registration or 2022 NYS Income Tax Return)
- □ COPY OF THE ENTIRE TRUST
- LETTER FROM THE SCHOOL (If any school age children, Grades K-12, reside at the property)
- **DEATH CERTIFICATE** (If one of the owners on the Deed/Certificate of Shares or their spouse is deceased)
- DIVORCE OR LEGAL SEPARATION PAPERS (If the applicant is divorced or legally separated)
- **RECORDED AFFIDAVIT CONFIRMING ABANDONMENT** (If applicant claims abandonment, a notarized affidavit must be submitted stating date of abandonment and intent to return)
- PROBATED WILL (If the sole owner on the Deed/Certificate of Shares is deceased)
- LETTER FROM THE RESIDENTIAL HEALTH FACILITY (If the owner resides in a residential health care facility, the letter must include the date of admission and date of expected discharge if applicable)
- **PROOF OF DISABILITY** (Award Letter or Certification)

INCOME INFORMATION (All income documentation must pertain to the 2022 tax year)

- **2022 FEDERAL AND STATE INCOME TAX RETURNS** (Required for all owners and their spouses) If you are married and filed separately, you must include <u>both</u> tax returns. An applicant(s) Name, Address and SSN(s) must appear on the Federal and NYS Income Tax Returns.
- □ IRS PRINTOUT (2022 Wage and Income Transcript) *
- SALARY OR WAGES (W-2's including Self-employment)
- **BUSINESS TAX RETURN** (If you have an S-Corp, Partnership, Trust or Estate Income Tax Return)
- PENSION/ VA DISABILITY AWARD LETTER (If receiving monies from your deceased spouse's pension)
- PENSIONS, ANNUITIES & RETIREMENT PLANS (1099-R Statements and taxable & non-taxable Pensions)
- DISABILITY/WORKER'S COMPENSATION PAYMENTS /UNEMPLOYMENT BENEFITS (1099-G or Current Award Letter)
- **SOCIAL SECURITY** (Complete copy of SSA-1099 showing name and address)
- **IRA EARNINGS** (Interest, Dividends or Capital Gains earned; 1099-R; Year-end Statement of Account or Letter from Financial Institution stating amount earned as Interest/Earnings/Dividends) DO NOT include the amount of your distribution.
- TAXABLE & NON-TAXABLE INTEREST/DIVIDENDS (All 1099-INT, 1099-DIV & 1099-R Year-end Statements)
- **BUSINESS INCOME** (Schedule C, S-Corp Tax Return with K-1 or Partnership Tax Return)
- **CAPITAL GAINS** (Include Tax-deferred Capital Gains Distribution Statements from Financial Institutions)
- **RENTAL INCOME** (Schedule E, Rent Received from all properties, Receipts for all Deductions)
- INCOME FROM ESTATES OR TRUSTS (Estate or Trust's Income Tax Return)
- **OTHER SOURCES OF INCOME** (e.g., Alimony/Child Support, Money from others living in the house toward expenses, Gambling Winnings, Proceeds from a Reverse Mortgage)

DEDUCTIBLE UN-REIMBURSED MEDICAL EXPENSES

- PRINTOUTS FROM A DOCTOR/DENTIST/PHARMACY FOR UN-REIMBURSED MEDICAL EXPENSES (Cancelled checks will not be accepted as proof of un-reimbursed expenses)
- **Statement of MEDICARE PREMIUM** or receipt for payment of PRIVATE HEALTH INSURANCE PREMIUMS
- LETTER from Health Care Facility stating date of admission, discharge and un-reimbursed expenses for owner's care
- □ Printout of OUT-OF-POCKET EYE/EYEGLASS EXPENSES

Volunteer Firefighter and Ambulance Workers Application

- **LETTER OF CERTIFICATION** by Fire Department or Ambulance Service as an Enrolled Member for at least 5 years of active service
- LETTER OF CERTIFICATION by Fire Department or Ambulance Service as having accrued at least 20 years of active service
- DEED or CERTIFICATE OF SHARES or PROPRIETARY LEASE
- **PROOF OF RESIDENCE** (Car Registration or Driver's License)

Alternate/Cold War Veterans Application

- DEED or CERTIFICATE OF SHARES or PROPRIETARY LEASE
- **PROOF OF RESIDENCE** (Car Registration or Driver's License)
- VETERANS DISCHARGE PAPERS (DD-214) MEMBER COPY # 4
- VA DISABILITY AWARD LETTER (Showing <u>combined</u> rating)

ALL FIRST-TIME NEW Enhanced STAR applicants, who purchased their property after January 2, 2015, must enroll in New York State's Mandatory Enhanced STAR Income Verification Program (IVP). Renewal applications are no longer required to be filed with Department of Assessment. NYS will verify STAR income eligibility and contact applicants, if additional information is needed.

FIRST-TIME NEW HOMEOWNER STAR APPLICANTS MUST REGISTER WITH NEW YORK STATE for the *Personal Income Tax Credit /Check Program* by telephone at (518) 457-2036 or on-line at <u>https://www8.tax.ny.gov/STRP/strpStart</u>

NYS will determine a First-Time/New homeowner's eligibility for the Basic or Enhanced STAR Tax Credit/Check Program.

Other Requirements:

* Even if you do not file a Federal Income Tax Return, you will be required to submit an IRS printout of your Wage and Income Statement to verify all taxable and non-taxable income.

To obtain a Wage and Income Transcript, you can make an appointment with the IRS office located at 999 Stewart Avenue in Bethpage by calling **1-844-545-5640** or visit the IRS website at <u>www.irs.gov</u> and download Form 4506-T and select Option # 8 (*"Form W-2, Form 1099 Series, Form 1098 Series or Form 5498 series transcript"*) to request a free copy of your transcript. Once completed, you should mail Form 4506-T to: Internal Revenue Service, RAIVS Team, Stop 6705 S-2, Kansas City, MO 64999 or fax it to 855-821-0094.

You may fax your transcript to the Department of Assessment at (516) 571-0478 or (516) 571-0479.

Please note that the exemption applications filing period for the 2024-25 property tax year closes on January 2, 2024.