

APPLICATION FOR SENIOR CITIZEN TAX RELIEF
SEC. 9.3 – 11/05/74

TAX YEAR _____

NAME _____ AGE _____ MALE ___ FEMALE ___

ADDRESS _____

PHONE _____ PROOF OF AGE _____

PARCEL NUMBER _____

NUMBER OF YEARS YOU HAVE BEEN A RESIDENT _____

DO YOU OWN YOUR HOME? _____

**I SWEAR THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY
KNOWLEDGE AND BELIEF.**

SIGNATURE _____ DATE _____

CITY USE ONLY

APPROVED _____ DENIED _____

AMOUNT OF REDUCTION _____

SIGNED _____ DATE _____

**THIS FORM MUST BE FILLED OUT EVERY YEAR TO BE ELIGIBLE FOR THE
TAX DISCOUNT**