State Tax Form 128-5C G.L. c. 59, § 5C

Tax Bill No. _____ RESIDENTIAL EXEMPTION Date application received:

COMMONWEALTH OF MASSACHUSETTS

Fiscal 20___ _____
Name of City or Town

APPLICATION FOR RESIDENTIAL EXEMPTION
MUST BE FILED WITHIN 3 MONTHS AFTER THE DATE THE TAX BILL WAS SENT.

The undersigned being aggrieved by failure to receive a residential exemption on real estate

situated at _____ for fiscal year 20_____
No. Street

hereby applies for such an exemption.

STATEMENT OF FACTS

Name(s) of record owner(s) _____

Name of applicant _____

Was this real estate owned and occupied by you as your principal residence on January 1, 20____?
YES _____ NO _____

Date Acquired: _____ How Acquired: _____
By Purchase, Inheritance, Foreclosure, Gift, ETC

List location of any other residential real estate owned by you.
_____

Have you ever received a residential exemption in any other city or town for the fiscal year to which This application relates? _____ If so, give the name of the city or town and the address of the property to which the exemption relates.
_____

Signing this form under the penalties of perjury has the legal effect of swearing under oath to the truthfulness of the information contained herein: All items on this form must be completed. In addition to other sanctions provided by law, intentional misrepresentation of facts in this application may result in cancellation of this exemption.

SUBSCRIBED THIS _____ day of _____, 20_____ UNDER THE PENALTIES OF PERJURY.

Signature of Applicant _____

Post Office Address _____

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX.

THIS FORM APPROVED BY THE COMMISSIONER OF REVENUE