Senior Citizen Property Tax Exemption

2020

DUE ON OR BEFORE **FEBRUARY 15**TH OF THE EXEMPTION YEAR

APPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31ST OF THE PRECEDING YEAR

VERIFICATION OF AGE MUST ACCOMPANY FILING (PASSPORT or BIRTH CERTIFICATE & PHOTO ID) IF PROPERTY IS RECORDED INTO A TRUST PLEASE INCLUDE A COPY WITH YOUR APPLICATION

Return completed form and requested information to: City & Borough of Sitka Assessor ·100 Lincoln St · Sitka, AK 99835 907-747-1822

Name: Beth A. Kindig	Assessor's Parcel Number: $2-5415-021$		
Mailing Address:	Physical Address: 4		
	on: 12×60 Manufactured home		
Home Phone: Cell: Applicants date of b	irth: Spouses name:		
CHDI	OWEN KINDIG		
Cell Phone: SPOUSE Applicants S.S.#	Spouses date of birth:		
I am applying as a: N Senior age 65+ and spouse [] Individual age 65 o	r older [] Surviving spouse age 60 or older		
Dwelling type:			
[] Single Family [] Condominium Mobile Home	[] Multi-Family [] Other		
What percent of ownership do you alone (or jointly with your	· · · · · · · · · · · · · · · · · · ·		
Is any portion of this property used for Commercial Purposes	? []Yes []No Rental Purposes? []Yes []No AIR B		
Is occupancy shared with someone other than your spouse and/or minor children? [] Yes No If yes, when did shared occupancy begin? Date What percent of the home do they occupy? % If live in care is medically necessary, attach a letter from the doctor.			
Do you or your spouse own property in another state? [] Yes [] No Do you receive any exemptions on that property? [] Yes [] No			
When traveling outside the state of Alaska, at what address do you primarily reside?			
Did you or will you receive a 2018 Alaska Permanent Fund Dividend? XYes [] No			
Will you qualify for a 2019 AK Permanent Fund Dividend? Yes [] No Will you or have you applied? Yes [] No			
If you answered "No" to any of the PFD questions, you must also complete the CBS Supplemental Form #1 (available at the Assessing Department or online) at - www.cityofsitka.com/government/departments/assessing			
I CERTIFY: This property is my primary residence and permanent place of abode. I will occupy it for a minimum of 185 days prior to each year in which I receive the exemption. The property is not used for non residential, temporary or vacation purposes, and is my true and fixed permanent residence. I hereby certify that the information I am supplying on and with this form is true and correct to the best of my knowledge. I authorize the City & Borough of Sitka to obtain access to records pertaining to me in possession of the State of Alaska as needed to verify my residency, age, and permanent fund dividend status. Falsely applying for an exemption or failing to notify the Borough Assessors Office of a change in exemption status, with the intent to evade taxation, is a misdemeanor and may result in fines and penalties under AS 11.56.210			
Both Anne Kindia	Bethakindy 5-5-2020		
Print or type Applicants name	Signature Date		
****ASSESSOR'S			
	AgeDeniedApprovedMARS VariableScan SC Brochure		
Ownershiprenn runurun	variablescar se biocitale		

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Return completed form and requested information to: City & Borough of Sitka Assessor $\cdot 100$ Lincoln St \cdot Sitka, AK 99835

7	907-747-1822				
Name: Haven Luc	Assessor's Par	rcel Number: 1-6070-000-000-0000			
Mailing Address:	Mailing Address:				
City:AK, Zip	Legal Description:	is, Block 1, Sitha			
Home Phone:	Applicants date of birth:	Spouses name:			
Cell Phone:	Applicants S S #	Spouses date of birth:			
I am applying as a: [] Senior age 65+ and spouse [Individual age 65 or older [] S	Surviving spouse age 60 or older			
Dwelling type: Single Family [] Condominium [] Mobile Home [] Multi-Family [] Other What percent of ownership do you alone (or jointly with your spouse) have in this property?%					
Is any portion of this property used for Commercial Purposes? [] Yes [No Rental Purposes? [] Yes [No					
Is occupancy shared with someone other than your spouse and/or minor children? [] Yes No If yes, when did shared occupancy begin? Date					
Did you or will you receive a 2018 Alaska Permanent Fund Dividend? [Yes [] No					
Will you qualify for a 2019 AK Permanent Fund Dividend? [v] Yes [] No Will you or have you applied? [] Yes [] No					
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Print or type Applicants name	Signatur	Date /			
****ASSESSOR'S USE ONLY****					
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OwnershipPern	n FundFullVariable	<i>Scan</i> SC Brochure			

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Return completed form and requested information to:
City & Borough of Sitka Assessor ·100 Lincoln St · Sitka, AK 99835
907-747-1822

	307-747-1022			
Name: Sandra L. Greb	Assessor's Pa	rcel Number: 1-7195 - 080		
Mailing Address:Physical Address:				
City:AK, Zip	Legal Description:Ow	ner		
Home Phone:	Applicants date of birth:	Spouses name:		
Cell Phone:	Applicants S.S.#	Spouses date of birth:		
l am applying as a:	Mindividual and CE and Idan			
	Individual age 65 or older []	Surviving spouse age 60 or older		
Dwelling type: Single Family [] Condominium	[] Mobile Home	ly [] Other		
What percent of ownership do you along				
Is any portion of this property used for Commercial Purposes? [] Yes [] No Rental Purposes? [] Yes				
Is occupancy shared with someone other	r than your spouse and/or minor child	ren? [] Yes [+]No		
If yes, when did shared occupancy begin		of the home do they occupy?		
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that property? [] Yes [] No				
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Sandra Greco	Signatur	Sandia 4/29/20 Date		
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****ASSESSOR'S USE ONLY****				
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	r Fund Full Variable			