

Marin Wildfire Prevention Authority (Measure C)

This application serves to request Measure C - Marin Wildfire Prevention Authority Low-Income Senior Exemption for 2020-2021. This exemption form must be filed annually.

Low Income Senior Exemption - The special parcel tax shall not be imposed upon any low-income owner, age sixty-five (65) years and over as of July 1 of each applicable Fiscal Year, of a parcel used solely for owner-occupied, single-family residential purposes, (house, condo, townhome) if the owner obtains an annual exemption to the special tax approved by the Marin Wildfire Prevention Authority. Low-income means the parcel owner's income is equal to or lower than the U.S. Department of Housing and Urban Development (HUD) income limits used to determine eligibility for assisted housing programs as set forth in the San Francisco, California HUD Metro FMR Area rates published annually.

To qualify for a Senior Low-Income Exemption for an owner-occupied, single family residence, you must be **65 years or older by July 1 of the tax year 2020**, and earn a total annual household income:

1 Person \$97,600 2 People \$111,550 3 People \$125,500 4 People \$150,600

Applications must be postmarked by June 30, 2020. If your application cannot be processed, you must provide a written explanation of the reason and requesting the necessary information needed to process your application.

All applicants must complete the following information (Please print clearly)

Residential Parcel #: _____
(This 8 digit Parcel # can be found on the upper left corner of your Property Tax Bill.)

The parcel is owner occupied: Yes No

Property Owner's Name(s): _____

Property Address: _____

City & Zip: _____

Daytime Telephone: _____

1. PROOF OF AGE (Required)

Please attach a copy of one of the following documents that shows that you will be at least 65 years of age by July 1, 2020. If you are not at least 65 years of age, you are not eligible to apply for an exemption in fiscal year 2020-21.

Driver's License Passport Birth Certificate Other Proof of Age (must show birth date)

2. PROOF OF INCOME

Total Household Income: _____ Number of people living in household: _____
*Household income is gross income, taxable, or non taxable, for all persons who occupy a single family residence and does not include tax adjustments, deductions, exemptions or credits. **(Please enclose in a sealed envelope a copy of 2019 filed tax returns (1040, 1040A or 1040EZ tax return) and/or Social Security Benefits Statements for all members of the household to be used in determining income qualifications for Senior Low Income Exemption. This form will be stamped and kept confidential and will only be used to determine your income qualifications. Please include only the pages showing income. Social security numbers may be redacted. Due to COVID19, if you haven't filed your 2019 tax return, you can submit 2018 tax returns.)**

3. SIGNATURE IS REQUIRED BELOW TO PROCESS APPLICATION

I declare under penalty of perjury under the law of State of California that this claim (including any accompanying proof of age documents) and the information including my household income and number of people in the household, to the best of my knowledge, is correct and complete. I attest I am an owner and a resident of the property listed above.

Executed this day of _____, 20__.

Property Owner's Signature: _____

Property Owner's Name (print legibly): _____

Warning: This application is subject to verification and any misrepresentations could result in a denial of the exemption. Applicants for the Low Income Senior Exemption must permit authorized representatives of the Marin Wildfire Prevention Authority, during regular business hours, to inspect, examine, and to allow such representatives to make copies of such books, records or other items for the purpose of confirming the accuracy of the information provided.

4. MAILING ADDRESS (Before mailing, please make a photocopy for your records)

Please mail, fax or email the completed application with attachments to:

NBS
Attn: MWPA Parcel Tax Exemption (Measure C)
32605 Temecula Parkway, Suite 100
Temecula, CA 92592
Email: customercare@nbsgov.com Telephone: (800) 676-7516
Your application must be post marked by June 30, 2020.

This form is for the 2020/21 tax year and is no longer valid. Please check back in late February 2021 for the 2021/22 application, which will be due June 30, 2021.