APPLICATION FOR ABATEMENT
INABILITY TO PAY - HARDSHIP OR POVERTY
(36 M.R.S. § 841)

Answer all questions. You may be requested to supply additional data to support your request. An application must be submitted each year for which abatement is requested. Pursuant to 36 M.R.S. § 841(2)(C), the municipality will provide a written decision within 30 days from the date they receive your completed application.

MUNICIPALITY: _____

1. Your name: _____
2. Address: _____
3. Location of your home: _____
4. Phone number: _____ Is this your primary residence? Yes ___ No___
5. Your date of birth: _____
6. Marital status: Single___ Married___ Separated___ Divorced___ Widow/widower___
7. Your family (Husband or wife and children; if none, enter your closest family member):

NAME	AGE	ADDRESS	RELATIONSHIP

8. Briefly explain where your income/support comes from: _____

_____

_____

_____

_____

9. Real estate owned by you and your spouse, in addition to your home:

DESCRIPTION/LOCATION	ASSESSOR'S VALUE
	$
	$
	$
	$

10. Mortgage or other debts you owe on this property: $_____
11. Total value of bank accounts in your name and, if married, in your spouse's name: $_____

12. Current cash value of securities or insurance you own: $_____

13. Brief description and value of other personal property you own, including cash:

_____

_____

_____

_____

14. Amount of annuity or pension you receive each year: $_____

15. Total annual cash income of applicant, and if married, of husband and wife, exclusive of annuity or pension of Item 14: $_____

16. Describe why you are requesting this abatement and why you feel you qualify:

_____

_____

_____

_____

_____

I hereby apply for abatement of property taxes in accordance with 36 M.R.S. § 841, which permits municipal officers to make such abatements as they believe reasonable for reason of hardship or poverty.

Under penalties of perjury, I declare that I have examined this application and, to the best of my knowledge and belief, it is true, correct, and complete.

Date_____ _____

Signature of Applicant

DO NOT WRITE BELOW THIS LINE

Property Tax for Year_____

Approved By:_____

Title:_____