

LANCASTER SEWER DISTRICT COMMISSION

APPLICATION FOR SEWER BETTERMENT DEFERRAL

General Laws 80, § 13B

Chapter 95 of the Acts of 1998.

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION

(See General Laws Chapter 59 § 60)

INSTRUCTIONS: This application must be filed with the Board of Sewer Commissioners within six months of notice of the sewer betterment assessment sent by the Tax Collector. A Betterment Assessment Deferral and Recovery Agreement (Form 97-1) must accompany application unless already on file and persons with interest in property remain the same. All sections must be fully completed, in print or type.

A. IDENTIFICATION

Name of Applicant \_\_\_\_\_ Marital Status \_\_\_\_\_

Social Security No. \_\_\_\_\_ (optional) Date of Birth \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_ If the first year of application, attach copy of birth certificate

Legal residence (domicile) on July 1, \_\_\_\_\_ Mailing Address (if different)

\_\_\_\_\_ No. Street City / Town Zip Code

Location of property: \_\_\_\_\_ No. of dwelling units 1 2 3 4 Other \_\_\_\_\_

Did you own the property on July 1, \_\_\_\_\_ And for the prior 10 years? Yes \_\_\_ No \_\_\_

If no, list the other properties you owned and / or occupied during the last 10 years.

Address	Dates	Owned	Occupied
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you been granted any exemption or deferral in any other city or town for these years? Yes \_\_\_ No \_\_\_

If yes, name of city or town \_\_\_\_\_

Amount of assessment you are seeking to defer this year \$ \_\_\_\_\_

Number of persons in your household \_\_\_\_\_

Their names and ages: \_\_\_\_\_  
\_\_\_\_\_

DISPOSITION OF APPLICATION (BOARD OF COMMISSIONERS USE ONLY)

Ownership \_\_\_\_\_ GRANTED \_\_\_\_\_ Assessed Amount \$ \_\_\_\_\_

Occupancy \_\_\_\_\_ DENIED \_\_\_\_\_ Deferred Amount \$ \_\_\_\_\_

Age \_\_\_\_\_ DEEMED DENIED \_\_\_\_\_ Adjusted Amount \$ \_\_\_\_\_

Income \_\_\_\_\_

Date voted / Deemed Denied \_\_\_\_\_

Certificate No. \_\_\_\_\_

Date Cert. / Notice sent \_\_\_\_\_

Date: \_\_\_\_\_ Board of Sewer Commissioners

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**B. PERSONS WITH INTEREST IN PROPERTY.**

Did you own the property on July 1, \_\_\_\_\_ as:

Sole owner \_\_\_\_\_ Co-owner with spouse only \_\_\_\_\_ Co-owner with others? \_\_\_\_\_

Was there a mortgage on the property as of July 1, \_\_\_\_\_? Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, amount due on mortgage \$ \_\_\_\_\_ Name of mortgagee(s) \_\_\_\_\_*

Was the property subject to a life estate as of July 1, \_\_\_\_\_? Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, names(s) of Remaindermen (person(s) receiving property after your death)*

Was the property subject to a trust as of July 1, \_\_\_\_\_? Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, please attach trust instrument including all schedules.*

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**C. GROSS RECEIPTS FROM ALL SOURCES IN PRECEDING CALENDAR YEAR.**

Copies of your federal and state income tax returns may be request to verify your income.

Applicant & Spouse

Retirement benefits (Social Security, railroad, federal, MA. & political subdivision) ..... \_\_\_\_\_

Other pensions and retirement allowances ..... \_\_\_\_\_

Wages, salaries and other compensation ..... \_\_\_\_\_

Net profits from business or profession ..... \_\_\_\_\_

Interest and dividends ..... \_\_\_\_\_

Other receipts (rent, capital gains, disability or veterans benefits, etc.) ..... \_\_\_\_\_

TOTAL \_\_\_\_\_

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**D. SIGNATURE.** Sign here to complete the application.

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, this return and all accompanying documents and statements are true, correct and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If signed by agent, attach copy of written authorization to sign on behalf of taxpayer.