TOWN OF STAFFORD ASSESSOR'S OFFICE

APPLICATION FOR 2017 GRAND LIST

Local Additional Veteran's Exemption

Name	Social Se	curity#			
Spouse's Name	Social Sec	Social Security #			
Mailing Address					
Telephone #	Marital Status:	al Status: Married 🗆		Unmarried \Box	
Are you presently receiving a 100% disability ra	ting from the V.A.?	Yes	No		
QUALIFYING INCOME (Income from all	sources for last calenda	r year):			
A. TAXABLE INCOME- If you are required to file enter the amount of Gross Income plus any other Examples: Wages, Bonuses, Commissions, Fees, Duty (excluding travel allowance), Lottery winnin & Pensions (including Veteran's), Taxable portion Net rent or Proceeds from sales of property etc. (Please note: Veteran's Disability payments are not	income. Gratuities, Payment for angs, Taxable portion of Ann of IRAs, Interest, Divide	Jury Annuities dends,	A		
B. NON-TAXABLE INTEREST- Example: Interest from Tax Exempt Government Bonds			В	В	
C. SOCIAL SECURITY OR RAILROAD RETIREM	ENT INCOME		C		
D. ANY INCOME NOT REFLECTED IN THE ABO	VE		D		
E. TOTAL add lines A through D			E		
Signature of Applicant	Date	e			
Assessor's Affidavit: I am satisfied that the above named a This claim is disallowed for the follow	pplicant meets all the neces	ssary statutory re	quirements		
Signature of Assessor or Member of Assess	sor's Staff Dat	e			