

2021 SENIOR VALUATION PROTECTION INFORMATION AND APPLICATION

<u>Purpose</u>: To freeze application year <u>Limited Property Value</u> of a Primary Residence owned by seniors based on income, age and residency. For property located in Maricopa County only. It is important to note that this program does not freeze your property TAXES, it freezes the taxable portion of your property VALUE.

<u>Application and supporting documentation deadline</u>: September 1, 2021.

Applicants qualified by September 1st will be notified by December 1st of application year. Applications after September 1st will be processed for the following year.

<u>Mail To</u>: Maricopa County Assessor, Senior Valuation Protection, 301 W Jefferson St, Phoenix, Arizona 85003 <u>Phone</u>: 602-506-3406, by fax: 602-506-7620 or by email: <u>PE.SVP@maricopa.gov</u>

Important Requirements for Applicant

<u>Please black out your Social Security numbers and account numbers to protect your identity.</u>

<u>In order to prevent delays in processing your application, please ensure the following documentation is included with your application: (Please do not use staples, tape or glue)</u>

- _1. Applicant Proof of Age: **Minimum age of 65** for at least one owner on title.
 - Driver's License or
 - Birth Certificate or
 - Passport
- 2. Applicant Proof of Primary Residence for 2 years (Note: This document must show your physical address *and* be at least 2 years old). Owner name must be on title of property.
 - Driver's License or
 - State Issued ID Card *or*
 - Voter Registration
- _____ 3. Documentation of ALL sources of Income, TAXABLE & NON-TAXABLE; for Owner & Co-Owners of the Property for 2018, 2019, & 2020. Income limits for the 2021 application year are \$38,112 for one owner, and \$47,640 for two or more property owners.
 - Copies of your SIGNED, AZ TAX RETURNS or Federal 1040 tax returns or
 - Social Security (Form SSA-1099 Statements)
 - Interest / Dividends (Form 1099-R Statements)
 - Wages / Salary / Tips (Form W2 Statements)
 - Pension / Annuity / IRA / (Form 1099-R Statements; include any rollover documentation)
 - Capital Gains / Rent & Royalties (Form 1099-B / 1099 Misc. Statements)
 - Veteran's Benefits (Award Letter or bank statements reflecting deposit amount)
 - Welfare Benefits (e.g., Alimony, Workman's Comp., etc.)
 - 4. Applicant(s)' signatures on completed application.

Contacts to obtain copies of your income documentation

Social Security Administration 1-800-772-1213

Veteran's Administration 1-800-827-1000

Internal Revenue Service 1-800-906-9887 "Tax Return Transcripts" are required in lieu of Tax Returns.

If qualified, owners must renew every 3 years. Renewal applications will be sent 6 months prior to the deadline of September 1st of renewal year.



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2021 SENIOR VALUATION	I ROTECTION IN	OKIMATION AND	All Eleation
Application Year: 2021 (Protection years 2022 through 2	D24) Parcel Nur	nber:	
Applicant Name:			
Co-Owners:			
Property Address:			
City/State/Zip:			
Mailing Address (If different from site):			
Email:Pho	ne Number:		
Parcel ID of other parcels you own:			
Please use the worksheet below to list yearly Adjusted Gr from ALL owners for past three years . If you do not have column. Please sign and mail your application as soon as post documents is September 1 st. The Assessor is required to Per Arizona Constitution, Article 9, Section 18.7.	re income in a parti ssible. The deadlin	cular category, ple e for application	ase list zero in that s and supporting
	2019	2010	2020

Income Type	2018 Year #1	2019 Year #2	2020 Year #3
Salaries, wages and tips earned	\$	\$	\$
Social Security benefits received (include Medicare)	\$	\$	\$
Pension, IRA, annuity income received	\$	\$	\$
Dividend and interest income received	\$	\$	\$
Rent and royalties received. (Schedule E)	\$	\$	\$
Capital Gains received. (Schedule D)	\$	\$	\$
Business and farm income received (Scheds C & F)	\$	\$	\$
Unemployment insurance payments received	\$	\$	\$
Workmen's compensation payments received	\$	\$	\$
Railroad and other retirement benefits received	\$	\$	\$
Veteran's benefits received	\$	\$	\$
Welfare payments received	\$	\$	\$
Other income earned or received:	\$	\$	\$
Total:	\$	\$	\$

Provide copies of your supporting documents with your application (PEASE DO NOT USE STAPLES):

- Proof of applicant's age (65+) and 2-year residency.
- 1099 income statements and federal tax returns.

<u>NOTE:</u> The Assessor is required to review income qualifications for this program on a triennial basis and must use the average total income during the previous three years for renewals. Please make sure you maintain the necessary records for this review and use the 3-year, <u>renewal</u> form that will be mailed to you 6 months prior to your renewal date. For more information, please call 602-506-3406.

Did owner(s) file federal tax return(s) for (please circle) 2018? (Yes / No) 2019? (Yes / No) 2020? (Yes / No)

Income from all gross taxable and non-taxable sources shall not exceed \$38,112 for one owner and combined income of \$47,640 for two or more owners in an income average of the past three years.

Under penalty of perjury, I hereby state that all of the income information is complete and true and is an accurate listing of all taxable and non-taxable income of the applicant and all co-owners.

Signature	Date	Signature	Date