STATE TAX FORM	128-5C
TAX BILL NO.	

FISCAL YEAR 2024

## RESIDENTIAL EXEMPTION THE COMMONWEALTH OF MASSACHUSETTS

Do not write in this space. Date application received:	

## **CONCORD**

NAME OF CITY OR TOWN

## APPLICATION FOR RESIDENTIAL EXEMPTION

MUST BE FILED NO LATER THAN 3 MONTHS AFTER THE DATE THE ACTUAL TAX BILL IS ISSUED.

ALL TAXPAYER INFORMATION ON THIS FORM MUST BE COMPLETED IN FULL

<u>AND</u> REQUIRED DOCUMENTATION ATTACHED TO BE CONSIDERED FOR THE RESIDENTIAL EXEMPTION.

APPLICATIONS ARE FOR THE 2024 FISCAL YEAR BEGINNING JULY 1, 2023.

PARCEL ID	#	
The undersigned	l hereby applies for a Residential Exemption	for Fiscal Year 2024 on real estate situated at:
Number #	Street	
Number #		NT OF FACTS
1) Name(s) of re	ecord owner(s)	
2) Name of App	licant(s)	
3) Date Property	Acquired:	_
4) Was this real	estate owned and occupied by you as your p	principal residence on January 1, 2023?: YES: NO:
(required). Att	tach the copy, skip line 6 & go to line 7. If return e not required to file a tax return due to low incor	Fax Return (front page) showing the Above Real Estate Address shows a P.O. Box, attach a copy & 1 other piece of evidence listed in me, submit a short written explanation and at least 2 pieces of other nit documents showing you are the beneficiary of the trust.
6) Other Evidence	e: Copy of Driver's License (both sides) 🗆; Cop	y of redacted 2021 Federal Tax Return (front page) ☐; Copy of
Motor Vehicle l	Registration □; Copy of Gun Permit □; Copy	y of Other 2022 Federal Form showing address $\square$
7) List the locati	on and type of any other residential real esta	te owned by you:
8) Have you rece	eived or applied for a residential exemption	in any other state, city or town for this fiscal year?
YES:	NO: If yes, where?	City/State
Signing this form information cont provided by law.	n under the penalties of perjury has the legal tained herein. All items on this form must be	effect of swearing under oath to the truthfulness of the completed as indicated. In addition to other sanctions application may result in cancellation of this exemption and
SUBSCRIBED TH	HIS DAY OF	_, 20 UNDER THE PENALTIES OF PERJURY
9) Signature of	Applicant:	
10) Mailing Add	dress (if different than property location):	
	Do not writ	e below this line.
GRANTED:	DENIED:	NO ACTION:
DATE:	CERTIFICATE #:	AMOUNT ABATED: