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JUL 12 2023



2022

### SENIOR CITIZEN EXEMPTION

DUE ON OR BEFORE MARCH 31 OF THE EXEMPTION YEAR  
APPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31  
OF THE PRECEDING YEAR.

Proof of age is required prior to application approval.

Name: [Redacted] Property ID (PIN): [Redacted]

Mailing Address: [Redacted] Physical Address: Sandy

City: Soldotna AK Zip: 99669 Legal Description: [Redacted]

Phone: [Redacted]

Email: [Redacted] Spouse's Name: \_\_\_\_\_

Applicant's Date of Birth: [Redacted] Spouse's Date of Birth: \_\_\_\_\_

Applicant's SSN: [Redacted] Spouse's SSN: \_\_\_\_\_

I am applying as a:  Senior Age 65 & Spouse  Individual Age 65 or Older  Surviving Spouse Age 60 or Older

<b>Dwelling Type:</b> <input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family Dwelling <input type="checkbox"/> Mobile Home <input type="checkbox"/> Other <input type="checkbox"/> Condominium	<b>Is any portion of this property used for:</b> Commercial Use? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Rental Purposes? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Explain: _____
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Is occupancy shared with someone other than your spouse and/or minor children?  YES  NO

If yes, date of shared occupancy? \_\_\_\_\_ What portion of the home do they occupy? \_\_\_\_\_

If live-in care is medically necessary, attach a letter from a physician recommending need for live-in care.

Do you or your spouse own property in another Borough or State? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Please list your other property address, city & state: _____
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If YES, does the property receive an exemption?  YES  NO

**Alaska Permanent Fund Eligibility**

When was the last year you applied for the Alaska Permanent Fund Dividend? 2021 *forgot to file this year*

Will you apply for the next Permanent Fund Dividend?  YES  NO What year will that be? \_\_\_\_\_

Applicants who do not receive an Alaska Permanent Fund Dividend must complete KPB Supplemental Form #1 or the application will be denied. (Supplemental forms are available at the Assessing Department or on-line.)

**I CERTIFY:** This property is my primary residence and permanent place of abode. I occupied it as my primary residence for a minimum of 185 days in the year prior to the year of this application. (If you do not meet this requirement, you must provide satisfactory evidence that you meet the statutory criteria for an allowable absence under AS 43.23.008.)

I hereby attest that the information above is true and correct to the best of my knowledge, and I will notify the borough assessing department if I do not meet this requirement in any future year for the duration of this exemption.

[Redacted Signature] 07-11-23

PRINT OWNER NAME

SIGNATURE

DATE

\*\*\*\* ASSESSOR'S USE ONLY \*\*\*\*

(S)PBV  OWNERSHIP <u>7.2.2007</u>	AGE	FULL	VARIABLE	APPROVED	ENTERED BY
	<u>AKDL 1956</u> PERM FUND <u>2022-YES</u>	CONTIG	DENIED		

revised 6/5/2019

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AFFIDAVIT OF

[Redacted Name]

(Senior Citizen or Disabled Veteran Applicant Name)

**AND APPLICATION FOR APPROVAL OF LATE FILING  
FOR SENIOR CITIZEN OR DISABLED VETERAN EXEMPTION**

BY: AS

This application is made pursuant to A.S. 29.45.030 Required Exemptions and KPB Code 5.12.105. Real Property Tax - Exemptions - Senior Citizens, Disabled Veterans and surviving spouses thereof.

Good cause means an inability to comply with the March 31 deadline that was caused by a serious condition or extraordinary event beyond the taxpayer's control. A serious condition or extraordinary event may include a serious medical condition or other similar serious condition or extraordinary event. (Absent extraordinary circumstances, a mere failure to pick up or read mail or to make arrangements for an appropriate and responsible person to pick up and read mail or a failure to provide a current address to the Department of Assessing will not be deemed good cause). Failure to meet the filing deadline is based upon the following good cause:

**Please describe the serious condition or extraordinary event that caused your failure to meet the March 31st filing deadline. (Please attach any documentation you may have that supports your request).**

*In the spring of 2022 I visited the tax assessing Department and was informed my Homestead Exemption covered the taxes. I recently received the 2023 tax bill and apparently the tax assessor rector active the 2022 tax, thereby denying me the opportunity to file for any tax exemptions. Please note that I am 100% disabled vet with service connection.*

*therefore, please grant me 2022 Tax exemption. Thankyou for your time.*

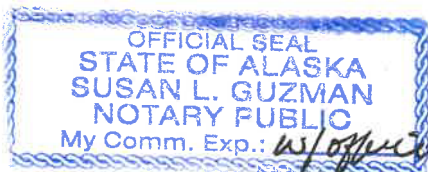
FURTHER AFFIANT SAITH NAUGHT.

Dated at Soldotna, Alaska, this 12<sup>th</sup> day of July, 2023

[Redacted Signature]

Applicant Signature

SUBSCRIBED AND SWORN to before me this 12 day of July, 2023



*Susan Guzman*  
Notary Public  
My Commission Expires: w/office

Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly by the Mayor's Office.

Assembly Action: APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_